COUNTY BOROUGH OF BOURNEMOUTH

# Annual Report

of the

# Medical Officer of Health

and

# Principal School Medical Officer

for the Year 1956

Public Health Department,
17, St. Stephen's Road,
Bournemouth.

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*To the Mayor, Aldermen and Councillors of the County Borough of Bournemouth.*

Mr. Mayor, Ladies and Gentlemen,

I have the honour to present my Annual Report on the health and sanitary conditions of the County Borough of Bournemouth for the year 1956, the seventy-eighth in the series.

Insofar as the vital statistics of the Borough are concerned, there is cause both for congratulation and heart searching. The population increased from 141,800 to 142,600, the birth rate from 10.73 to 11.26 per 1,000, and the death rate declined from 16.15 to 16.04 per 1,000 of the population. There was, on the other hand, an increase in infant mortality from 15.1 to 21.8 per 1,000 live births, and an increase in stillbirths from 22.5 to 23.1 per 1,000 total births.

These two latter events are disquieting, for they show that there is still a long way to go in the antenatal supervision of the expectant

mother, and it is to be hoped that the forthcoming national investigation into perinatal mortality will produce evidence that will leave no doubt in the minds of all concerned with this problem that even in the present state of our knowledge, a considerable wastage of infant life is taking place. If the investigation can throw light on questions still to be answered in the matter of prematurity and congenital defects, so much the better.

The incidence of infectious disease was fortunately low throughout the year, and although only two of the four additional temporary public health inspectors could be appointed for duty during the holiday season they were able to assist their colleagues in a tremendous amount of really valuable work in supervising hotels, boarding houses and food premises generally, and only one outbreak of food poisoning occurred in an hotel during the year.

Dr. W. H. Tattersall, the Senior Chest Physician in Bournemouth, has once again drawn detailed attention to the preventive and curative work being carried out by chest physicians of the Regional Hospital Board. Although the number of cases on the clinic register remains high, it must be remembered that many sufferers from tuberculosis and "weak chests" come to Bournemouth in an attempt to restore the health they lost in less favoured areas, and many of them not only require supervision and treatment, but also frequently become applicants for Corporation housing accommodation. A difficult problem therefore tends to develop, as some of these families come to live under conditions poorer than those in their former homes, and may cause a spread of infection not only in their own families but among the public at large. Attention is also drawn to the increasing amount of domiciliary treatment being carried out, leading to greater calls on the services of health visitors, home nurses and the occupational therapist.

The combined Ambulance Service dealt with a greater number of calls during 1956 than in any previous year, 45,686 patients being carried a total distance of 222,639 miles. The use of radio control has undoubtedly been one of the main factors allowing this considerable volume of work to be undertaken, for the staff at the Ambulance Depot has remained unchanged since the end of 1951, when local authority ambulances carried 12,335 patients 103,192 miles, compared with 27,409 patients and a mileage of 148,584 during 1956.

The domiciliary services of the Corporation have again been very fully extended, and while there are signs that the calls upon home nurses are slowly reaching their peak, the scope of health visiting and domestic help is limited only by financial considerations and shortage of suitable personnel. There is, in a sense, a lack of balance in the domiciliary services, which require strengthening in certain departments if these services are to make their maximum contribution towards the National Health Service, and ease the burden on the enormously expensive hospital service.

There has again been an increase in the number of patients admitted to mental hospitals for treatment, but the increase has been in those admitted voluntarily rather than in the number of certified patients. The after-care of recovered patients and the pre-care of early cases of mental illness has unfortunately been brought almost to a standstill by the lack of a trained psychiatric social worker, and if the recommendations of the Royal Commission on the Law Relating to Mental Illness and Mental Deficiency become law, the local authority will almost certainly have to provide community services on a scale hitherto undreamed of, and from a class of professional workers who exist at the moment in only very small numbers.

Mr. W. Riley, Chief Public Health Inspector, has drawn special attention to the Food Hygiene Regulations, 1955, which became operative in two stages, on 1st January and 1st July, 1956. A town such as Bournemouth, whose prosperity is so vitally concerned in attracting the holiday-maker and catering for his every need, cannot afford to have anything but the highest standards of hygiene in its hotels, boarding houses and food premises generally. Mr. Riley, in his review of the year's inspection of food and food premises, focuses attention on the numbers of such catering premises and the steps taken by his inspectors to avoid any cause for complaint by the public.

In a report which is complementary in many ways to that of Mr. Riley, the Public Analyst Mr. Carlos has produced disquieting evidence of adulteration and irregularity in samples of both food-stuffs and milk. Samples of food and drugs showed irregularities in 8.4 per cent. of cases compared with 5.4 per cent. in 1955 and in regard to milk samples no fewer than 38.3 per cent. failed to conform to the minimum legal standard being deficient in fat, solids not fat,

or both. It is true that in a number of cases the deficiency was only slight, but a comparison with the 4.7 per cent. irregular milk samples in 1955 reveals a very unsatisfactory state of affairs, and suggests that warnings issued in the past to offending producers have had little if any effect, and that a sterner policy should be adopted in future. There has similarly been an increase in the number of foreign bodies discovered in foodstuffs, glass, metallic fragments, insects, and the like. For this there can be no possible excuse, as offences of this kind are almost invariably due to carelessness in preparation, and manufacturers must realise that their reputation is in the hands of their employees.

Finally, attention must be drawn to the slow progress of slum clearance, for although the problem is a small one in Bournemouth in terms of dwellinghouses to be demolished, a variety of circumstances have combined to delay the Council's programme, and unsatisfactory premises can only become more unsatisfactory with the passing of time.

It is my great pleasure to thank the Chairman and members of the Health Committee for their help and encouragement during the year, and my thanks are also due to my Deputy, Dr. J. H. Maughan, to my Chief Administrative Assistant, Mr. J. W. Roberts, and to all other members of my staff who have worked so cheerfully and so well.

I have the honour to be,

Mr. Mayor, Ladies and Gentlemen,

Your obedient servant,

WILLIAM FIELDING.

# Health Committee and Staff

## as at 31st December, 1956

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### HEALTH COMMITTEE

The Mayor (Councillor P. G. Templeman, J.P.)

Alderman J. H. Turner (*Chairman*)

Councillor A. H. Abbott (*Vice-Chairman*)

*Council Members*

| | | | |
|---|---|---|---|
| Alderman | J. B. C. Beale, J.P. | Councillor | J. G. Middleton |
| ,, | H. C. Brown, O.B.E. | ,, | F. A. W. Purdy |
| ,, | T. Peaty | ,, | A. Scott |
| Councillor | Mrs. B. Bicknell, J.P. | ,, | C. E. Walker, M.B.E., M.A. |
| ,, | W. Collins | ,, | Mrs. M. C. Wall |
| ,, | H. J. Mears (Junior) | ,, | W. J. Whitelock |

*Other Members*

L. L. J. Morgan, Esq.
A. A. F. Shepherd, Esq., L.R.C.P., L.R.C.S.
N. Ross Smith, Esq., F.R.C.S.
R. G. Torrens, Esq., B.A., B.D.Sc.
C. Heygate Vernon, Esq., F.R.C.S.

### PUBLIC HEALTH DEPARTMENT

| | |
|---|---|
| Medical Officer of Health, Principal School Medical Officer, and Medical Referee to Cremation Authority ... ... ... | William Fielding, B.Sc., M.D., Ch.B., M.R.C.S., L.R.C.P., D.P.H. |
| Deputy Medical Officer of Health, Deputy Principal School Medical Officer, Deputy Medical Referee to Cremation Authority ... | John Harry Maughan, M.B., B.S., D.P.H. |
| Assistant Medical Officer of Health, School Medical Officer | C. J. Sanderson, M.R.C.S., L.R.C.P., D.P.H. |
| Assistant Medical Officer of Health, School Medical Officer | F. A. Heimann, L.R.C.P., L.R.C.S., L.R.F.P.S., M.D.(Breslau) |
| Assistant Medical Officer of Health (Maternity and Child Welfare), School Medical Officer | P. K. H. Keating, L.R.C.S.(I), L.R.C.P.(I), L.M., D.C.H. |
| Principal Dental Officer ... ... | A. A. Wood, L.D.S., R.C.S. |
| Dental Officers ... ... ... | H. S. Hooper, B.D.S., L.D.S., R.C.S.<br>F. E. Lockwood, B.D.S. (Univ. L'pool).<br>W. J. Mackillop, L.D.S. (Hons.), R.F.P.S. (Glasgow). |

| | |
|---|---|
| Chief Public Health Inspector ... | William Riley, F.R.S.H. * † ° ‡ |
| Deputy Chief Public Health Inspector ... ... ... | Jack Randall, M.R.S.H. + †° ‖ |
| District Public Health and Food Inspectors ... ... ... | H. R. Ambrose + † W. G. Clarkson + † M. Guthrie, M.C. + † A. J. Mortimer + † ‖ S. M. Payne + † ‖ S. Tweedie + † (1 vacancy) |
| District Public Health Inspectors | W. Vincent Morris,* S. Powell,* ‖ Plus 6 Assistants. |
| Superintendent Health Visitor ... | W. M. Melhuish |
| Health Visitors (and School) Nurses) ... ... ... ... | L. M. Austin, P. A. Brierley, C. V. Bailey, P. M. Carey, M. G. Cornish, F. Darlington, M. H. Dutton, E. M. Gibbs, M. J. Grosvenor, C. C. Hannan, A. D. Lane, E. M. Litten, G. M. Lunn, S. Rodd, G. E. C. Steel, E. Tonkin, B. D. Turner, E. Turner, J. Wilkinson. |
| Municipal Midwives ... ... | L. Hawthorne, H. E. Holmes, B. McBride, M. H. Popham, E. M. Schoch, D. M. A. Sharp |
| Superintendent, Home Nursing Service ... ... ... ... | F. Grindrod |
| Senior Nurse, Home Nursing Service ... ... ... ... | E. Lane |
| Home Nurses ... ... ... | I. L. Attridge, M. Burnett, M. DaCosta, G. Draper, E. Finnemore, A. Fisher, M. Fothergill, E. P. Gilbert, R. Guscott, M. Higgins, B. Jackson, M. E. James, M. Jones, M. Large, P. R. May, M. S. McKenney, L. Mist, M. K. Mundy, E. Rampton, C. Rimanoczy, V. A. Robbins, E. E. Souter, G. H. Sutton, D. E. Welch. |
| Educational Psychologist ... | B. W. Foxley |
| Psychiatric Social Workers ... | J. Higgins. (1 vacancy). |
| Duly Authorised Officers ... | F. H. Lewis, L. H. G. Cooper, R. Smith (both Part-time. |
| Mental Health Worker ... ... | R. Smith |
| Dental Attendants ... ... | H. Allen, D. M. Cox, B. D. M. Read, N. Woods. |
| Chief Administrative Assistant and Chief Clerk ... ... | J. W. Roberts. |
| Senior Administrative Assistant | Vacant. |
| Secretary to Medical Officer of Health ... ... ... ... | Mrs. M. Shipp |
| Section Clerks ... ... ... | C. Lockett, F. J. Goode, G. A. Capes. |
| Clerks ... ... ... ... | S. C. Banks, H. R. Bryan, K. F. Clarke, M. A. Cormack, N. L. Hills, B. L. Johnson, E. M. Langridge, V. Lansley, E. G. Payne, J. W. Peake, R. W. Rowe, E. V. Sweet, S. G. Tarrant, B. Tyrer, M. Watton, D. Woodgate |
| Home Help Organiser ... ... | Mrs. L. A. Horwood |
| Ambulance Depot Superintendent | A. N. Platts |

| | |
|---|---|
| Occupation Centres ... ... | C. R. Ashley, Miss H. R. Copping (Supervisors), Mrs. J. C. Ellis, W. E. Fisher, Mrs. G. M. Nott, S. Nott, Miss J. F. Randall. |
| Superintendent of Public Conveniences and Mortuary ... | W. C. R. Jewell |
| Rodent Officer ... ... ... | F. Bennett, plus 5 Operatives. |

## PART-TIME OFFICERS

| | |
|---|---|
| —Chest Physicians ... ... | W. H. Tattersall, M.A., M.D.<br>A. C. Craig, B.Sc., M.B., Ch.B.<br>A. T. Hendry, M.B., Ch.B., F.R.F.P.S.,<br>D. J. Ap. Simon, M.A., M.B., B. Chir., M.R.C.S., L.R.C.P. |
| —Consultant Children's Psychiatrist | W. H. Whiles, M.R.C.S., L.R.C.P., D.P.M. |
| Public Analyst ... ... ... | A. S. Carlos, B.Sc., F.R.I.C. |
| Meteorological Registrar ... | A. J. Mortimer (Part-Time) |
| Deputy Meteorological Registrars | C. Lockett, S. Tweedie (both Part-Time) |

* Certificate of the R.San.I. for Sanitary Inspectors.
† Certificate of the R.San.I. for Inspectors of meat and other foods.
° Certificate of the R.San.I. for Smoke Inspectors.
+ Certificate of the R.San.I. and Sanitary Inspectors' Examination Joint Board.
‡ Certificate of the Examination Board of the Sanitary Inspectors' Association (1921).
‖ Certificate of the R.San.I. for Sanitary Science.
—Employed by South West Metropolitan Regional Hospital Board.

# General Statistics

| | | |
|---|---|---|
| Area of the County Borough | ... | 11,627 acres |
| Estimated Civilian Population | ... | 142,600 |
| Rateable Value at 1.4.56 ... | ... | £3,906,018 |
| Product of 1d. rate, 1956/57 ... | ... | £15,908 |

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# Vital Statistics

| | | |
|---|---|---|
| Live births | Male Legitimate 776, Illegitimate 57<br>Female ,, 710, ,, 63 | 1606 |
| Birth rate (per 1,000 population) ... ... ... .. . | | 11.26 |
| Stillbirths | Male Legitimate 16, Illegitimate 3<br>Female ,, 19, ,, — | 38 |
| Stillbirth rate (per 1,000 total live and still births) .. .. | | 23.11 |
| Total Deaths (Males 1025, Females 1263) ... ... ... ... | | 2288 |
| Death Rate (per 1,000 population) ... ... .. .. ... | | 16.04 |
| Adjusted Death Rate (per 1,000 population) ... ... ... | | 11.07 |
| Maternal Deaths (Sepsis Nil, Other causes 1) ... . ... | | 1 |
| Maternal Mortality Rate (per 1,000 total births) ... . . . | | .61 |
| Number of deaths of infants (under 1 year of age) :—<br>Legitimate 30 Illegitimate 5 ... ... .. ... | | 35 |
| Infant Mortality Rate (per 1,000 live births)<br>(Legitimate 20.19 Illegitimate 41.67) ... .. ... | | 21.79 |
| Deaths from Whooping Cough, all ages ... ... ... ... | | Nil |
| Deaths from Measles, all ages... ... ... ... ... ... | | Nil |
| Deaths from Diarrhoea, under 2 years of age ... ... ... | | 2 |
| Deaths from Pulmonary Tuberculosis (Males 8, Females 6) ... | | 14 |
| Death rate from Pulmonary Tuberculosis (per 1,000 population) | | 0.098 |
| Deaths from Non-pulmonary Tuberculosis (Males 1, Females, 3) | | 4 |
| Death rate from Non-pulmonary Tuberculosis (per 1,000 population) | | .028 |
| Deaths from Cancer (Males 204, Females 229) ... ... ... | | 433 |
| Death rate from Cancer (per 1,000 population) ... ... ... | | 3.04 |

## Births

The number of live births allocated to the area after adjustment for inward and outward transfers was 1606, an increase of 85 on the total for 1955.

| | |
|---|---|
| Average number of births, 1946-1955 | 1736. |
| Births in 1956 ... ... ... | 1606 |
| Average birth rate 1946-1955 ... | 12.52 per 1000 population. |
| Birth rate 1956 ... ... ... | 11.26 per 1000 population. |
| Birth rate England and Wales (1956) | 15.7 per 1000 population. |

## Stillbirths

Stillbirths are commonly associated with toxaemia of pregnancy and many of them could be prevented by more careful ante-natal supervision, but there are still unexplained factors associated with this condition. It is regrettable that in an area with so many natural and financial advantages the stillbirth rate for 1956 should exceed that of the country as a whole, including, as it does, the heavily industrialised areas where high stillbirth rates have always been found.

| | |
|---|---|
| Average number of stillbirths 1946-1955 | 40. |
| Stillbirths in 1956 ... ... ... | 38. |
| Average stillbirth rate 1946-1955 ... | 22.02 per 1000 total births. |
| Stillbirth rate 1956 ... .. ... | 23.11 per 1000 total births. |
| Stillbirth rate England and Wales (1956) | 23 per 1000 total births. |

## Illegitimate Births

The illegitimate birth rate in Bournemouth, although it has declined from the peak post war figure, still remains far higher than the national average. Illegitimate births accounted for 7.5 per cent. of the total births, compared with the national figure for 1956 of 4.6 per cent.

| | |
|---|---|
| Average number of illegitimate births 1946-1955 ... ... ... | 148. |
| Illegitimate births during 1956 ... | 123. |

## Prematurity

(i.e. babies weighing 5½lbs. or less at birth, irrespective of the period of gestation).

As in the case of stillbirths, prematurity is frequently the result of toxaemia of pregnancy, although multiple pregnancy, congenital

abnormalities and other unknown factors may cause it. In any event the premature infant is exposed to many hazards both during and after birth, and its chances of survival are in direct proportion to its birth weight.

During 1956, 119 premature births (7 per cent. of the total births) were notified in Bournemouth, as follows :—

| | *Live* | *Stillborn* | *Total* |
|---|---|---|---|
| Born at home ... ... | 26 | 1 | 27 |
| Born in Hospital ... ... | 72 | 11 | 83 |
| Born in Nursing Homes ... | 8 | 1 | 9 |
| | 106 | 13 | 119 |

During recent years there has been an increase in the proportion of premature births, which since 1949 has varied between 4.1 per cent. and 7 per cent.

A summary of the place of treatment of these small babies and the results obtained is shown :

| Weight at Birth | Premature Live Births | | | | | | | | | | | | | | | Premature Stillbirths | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | Born in Hospital | | | Born at home and nursed entirely at home | | | Born at home and transferred to Hospital on or before 28th day | | | Born in Nursing Home and nursed entirely there | | | Born in Nursing Home and transferred to Hospital on or before 28th day | | | | | |
| | Total | Died within 24 hours | Survived 28 days | Total | Died within 24 hours | Survived 28 days | Total | Died within 24 hours | Survived 28 days | Total | Died within 24 hours | Survived 28 days | Total | Died within 24 hours | Survived 28 days | Born in Hospital | Born at Home | Born in Nursing Home |
| 3lbs. 4oz. or less ... | 6 | 2 | 2 | — | — | — | 1 | — | — | — | — | — | — | — | — | 5 | — | — |
| Over 3lbs. 4oz. up to and including 4lb. 6oz. | 14 | — | 11 | 4 | — | 4 | — | — | — | 1 | — | 1 | — | — | — | 3 | — | 1 |
| Over 4lb. 6oz. Up to and including 4lb. 15oz. | 20 | 1 | 18 | 1 | — | 1 | 1 | — | — | 1 | — | 1 | — | — | — | 1 | — | — |
| Over 4lb. 15oz. up to and including 5lb. 8oz. | 32 | 1 | 30 | 19 | — | 19 | — | — | — | 6 | — | 6 | — | — | — | 2 | 1 | — |
| Totals ... ... | 72 | 4 | 61 | 24 | — | 24 | 2 | — | — | 8 | — | 8 | — | — | — | 11 | 1 | 1 |

## Infant Mortality

During the year, 35 infants died in the first year of life, giving an infant mortality rate of 21.8 per 1,000 live births. This was lower than the rate for England and Wales in 1956 (23.8 per 1,000 live births) but a considerable increase on the record low rate in Bournemouth during 1955, which was only 15.1 per 1,000 live births, and when only 23 infants died.

| | |
|---|---|
| Average infant mortality rate, 1946-1955 | 26.7 per 1,000 live births. |
| Infant mortality rate, 1956 ... ... | 21.8 per 1,000 live births. |
| Infant mortality rate England and Wales, 1956 ... ... ... ... ... | 23.8 per 1,000 live births. |

Of the 35 infants, 26 died in the first month of life, as follows :

| | |
|---|---|
| Prematurity ... ... ... ... | 10 |
| Congenital malformations ... ... | 8 |
| Birth injuries ... ... ... ... | 2 |
| Other conditions ... ... ... | 6 |

The nine remaining infants, who survived the neonatal period, died before their first birthday, due to the following conditions :

| | |
|---|---|
| Pneumonia ... ... ... ... | 4 |
| Congenital malformations ... ... | 3 |
| Gastro-enteritis ... ... ... | 2 |

Infant mortality has now become very much a matter of prematurity and congenital defects, but there is a great deal of evidence to show that some at least of these conditions are preventible, as they are associated with the health of the mother during pregnancy.

On the quality of ante-natal supervision depends the success or failure of future efforts to secure a reduction in the stillbirth and infant mortality rates, and as this supervision is now practically entirely in the hands of general practitioners and domiciliary midwives, the future is in their keeping.

## Maternal Mortality

During 1956, one maternal death was assigned to this Borough, a woman aged 30 years who died in hospital of renal failure following a septic abortion.

The maternal mortality rate of 0.61 per 1,000 total births compared with 0.56 per 1,000 total births for England and Wales.

# PROPORTION OF DEATHS FROM PRINCIPAL CAUSES, 1956.

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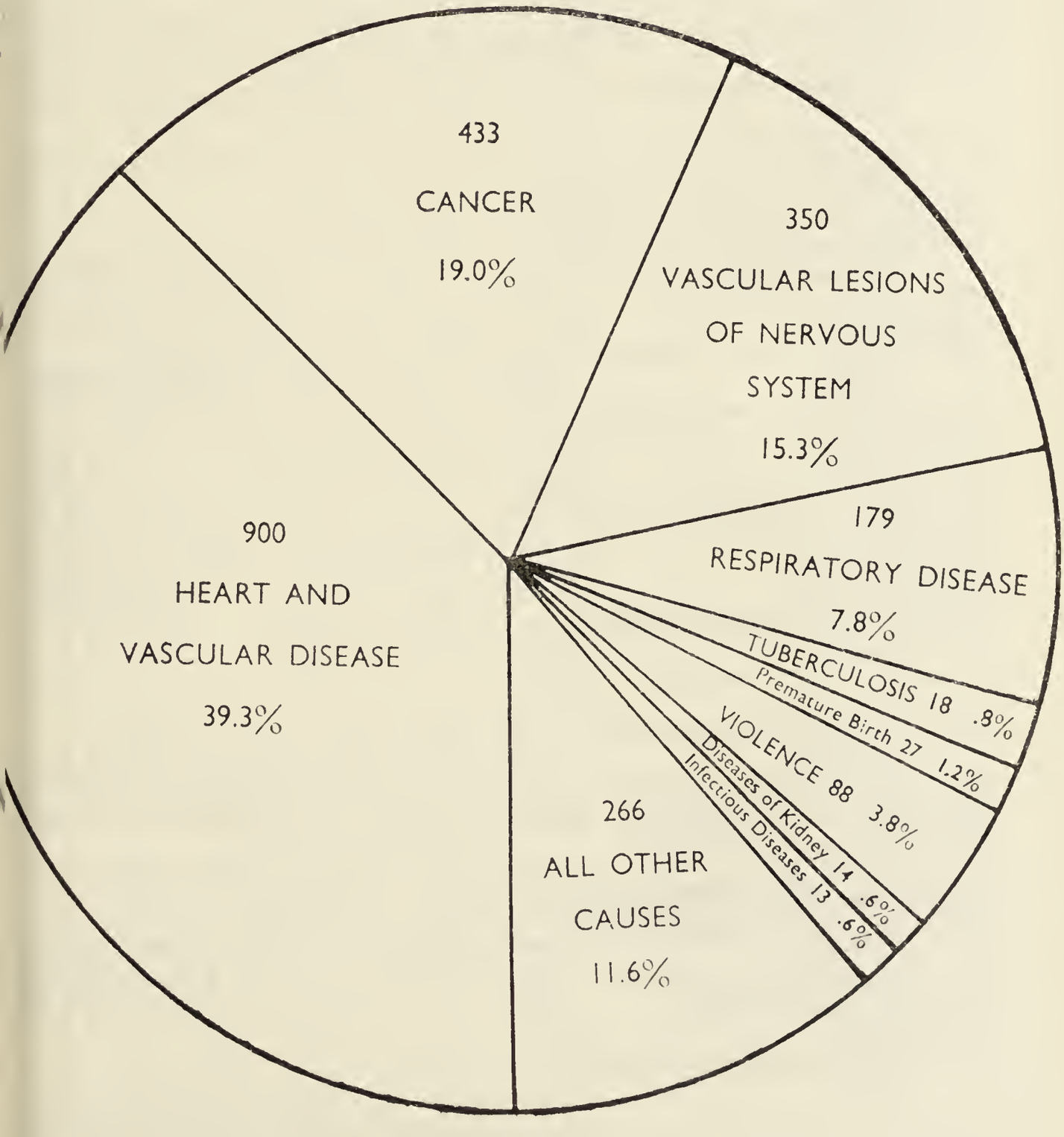
## Total Deaths, 2288



## CAUSES OF DEATH AT DIFFERENT PERIODS OF LIFE DURING THE YEAR 1956

| Causes of Death | All Ages | 0— | 1— | 5— | 15— | 25— | 45— | 65— | 75— |
|---|---|---|---|---|---|---|---|---|---|
| All Causes ... ... ... | 2288 | 35 | 5 | 4 | 9 | 58 | 387 | 607 | 1183 |
| 1—Tuberculosis, respiratory ... | 14 | ... | ... | ... | ... | 5 | 3 | 2 | 4 |
| 2—Tuberculosis, other ... | 4 | ... | ... | 1 | ... | ... | 1 | 2 | ... |
| 3—Syphilitic disease ... ... | 6 | ... | ... | ... | ... | ... | 1 | 3 | 2 |
| 4—Diphtheria ... ... ... | ... | ... | ... | ... | ... | ... | ... | ... | ... |
| 5—Whooping Cough ... ... | ... | ... | ... | ... | ... | ... | ... | ... | ... |
| 6—Meningococcal infections ... | ... | ... | ... | ... | ... | ... | ... | ... | ... |
| 7—Acute poliomyelitis ... | ... | ... | ... | ... | ... | ... | ... | ... | ... |
| 8—Measles ... ... ... | ... | ... | ... | ... | ... | ... | ... | ... | ... |
| 9—Other infective and parasitic diseases ... ... ... | 7 | ... | ... | ... | ... | 1 | 2 | 1 | 3 |
| 10—Malignant neoplasm stomach ... ... ... | 58 | ... | ... | ... | ... | ... | 20 | 19 | 19 |
| 11—Malignant neoplasm, lung, bronchus ... ... ... | 75 | ... | ... | ... | ... | 2 | 34 | 27 | 12 |
| 12—Malignant neoplasm, breast | 53 | ... | ... | ... | ... | 5 | 17 | 17 | 14 |
| 13—Malignant neoplasm, uterus | 20 | ... | ... | ... | ... | ... | 9 | 6 | 5 |
| 14—Other malignant and lymphatic neoplasms ... | 217 | ... | ... | ... | ... | 7 | 46 | 69 | 95 |
| 15—Leukaemia, aleukaemia ... | 10 | ... | 1 | ... | ... | 1 | 3 | 4 | 1 |
| 16—Diabetes ... ... ... | 17 | ... | ... | ... | 1 | ... | 2 | 6 | 8 |
| 17—Vascular lesions of nervous system ... ... ... | 350 | ... | ... | ... | ... | 5 | 38 | 86 | 221 |
| 18—Coronary disease, angina ... | 366 | ... | ... | ... | ... | 5 | 75 | 121 | 165 |
| 19—Hypertension with heart disease ... ... ... | 61 | ... | ... | ... | ... | ... | 1 | 19 | 41 |
| 20—Other heart disease ... | 380 | ... | ... | ... | 1 | 4 | 30 | 66 | 279 |
| 21—Other circulatory disease ... | 93 | ... | ... | ... | ... | 1 | 10 | 31 | 51 |
| 22—Influenza ... ... ... | 5 | ... | ... | ... | ... | ... | ... | 1 | 4 |
| 23—Pneumonia ... ... | 86 | 5 | 1 | 1 | ... | ... | 7 | 17 | 55 |
| 24—Bronchitis ... ... ... | 71 | 1 | ... | ... | ... | ... | 15 | 23 | 32 |
| 25—Other diseases of respiratory system ... ... ... | 22 | ... | ... | ... | 1 | ... | 8 | 5 | 8 |
| 26—Ulcer of stomach and duodenum ... ... | 22 | ... | ... | ... | ... | ... | 6 | 11 | 5 |
| 27—Gastritis, enteritis and diarrhoea ... ... | 11 | 2 | ... | ... | ... | 1 | 3 | 2 | 3 |
| 28—Nephritis and nephrosis ... | 14 | ... | ... | ... | 2 | 2 | 3 | 2 | 5 |
| 29—Hyperplasia of prostate ... | 23 | ... | ... | ... | ... | ... | 1 | 3 | 19 |
| 30—Pregnancy, childbirth, abortion ... ... ... | 1 | ... | ... | ... | ... | 1 | ... | ... | ... |
| 31—Congenital malformations | 15 | 9 | ... | ... | 2 | 1 | 3 | ... | ... |
| 32—Other defined and ill-defined diseases ... ... ... | 199 | 18 | 2 | ... | ... | 6 | 30 | 48 | 95 |
| 33—Motor vehicle accidents ... | 15 | ... | 1 | ... | 1 | 4 | 4 | 2 | 3 |
| 34—All other accidents ... | 57 | ... | ... | 2 | 1 | 5 | 6 | 10 | 33 |
| 35—Suicide ... ... ... | 15 | ... | ... | ... | ... | 2 | 8 | 4 | 1 |
| 36—Homicide and operations of war ... ... ... | 1 | ... | ... | ... | ... | ... | 1 | ... | ... |

## DEATHS FROM PRINCIPAL CAUSES, 1956

The tabular statement of causes of death and the diagrammatic analysis accompanying it show no major changes from 1955, diseases of the heart and arteries, cancer and chronic respiratory disease accounting for nearly 82 per cent. of all deaths. Over 78 per cent. of deaths were in persons over the age of 65 years and nearly 52 per cent. in persons over the age of 75 years.

A comparison over a number of years, however, shows certain trends not apparent when a shorter interval is chosen, and since the diagrammatic analysis was introduced into the Annual Report in 1951, the principal causes of death have varied as follows :

| | 1951 | 1952 | 1953 | 1954 | 1955 | 1956 |
|---|---|---|---|---|---|---|
| Total Deaths | 2295 | 2171 | 2039 | 2168 | 2290 | 2288 |
| Deaths from heart and vascular disease (incl. vascular disease of C.N.S.) | 1195 (52%) | 1201 (55.3%) | 1067 (52.3%) | 1256 (57.9%) | 1313 (57.3%) | 1250 (54.6%) |
| Deaths from cancer | 352 (15.3%) | 398 (18.3%) | 368 (18.0%) | 390 (18.0%) | 434 (19.0%) | 433 (19.0%) |
| Deaths from respiratory disease | 228 (9.9%) | 161 (7.4%) | 167 (8.2%) | 137 (6.3%) | 155 (6.8%) | 179 (7.8%) |
| Deaths from tuberculosis | 39 (1.7%) | 38 (1.8%) | 22 (1.1%) | 28 (1.3%) | 14 (0.6%) | 18 (0.8%) |

Although the total deaths in the Borough have remained remarkably constant during this six year period, and during the first and last years were almost identical, there has been a significant increase in cancer mortality, a lesser increase in mortality from heart and vascular disease, and a reduction in mortality from respiratory disease, quite apart from that due to the decline of pulmonary tuberculosis.

### Cancer Mortality

During the 1951-1956 period the total cancer deaths have increased from 352 to 433, with a site distribution as follows :

| Site | 1951 | 1952 | 1953 | 1954 | 1955 | 1956 |
|---|---|---|---|---|---|---|
| Stomach ... ... | 59 | 49 | 49 | 41 | 69 | 58 |
| Lung ... ... | 51 | 64 | 56 | 64 | 68 | 75 |
| Breast ... ... | 43 | 35 | 51 | 53 | 54 | 53 |
| Uterus ... ... | 11 | 14 | 15 | 23 | 13 | 20 |
| Other sites ... | 188 | 236 | 197 | 209 | 230 | 227 |
| Total ... ... | 352 | 398 | 368 | 390 | 434 | 433 |

Cancer of the lung, responsible for 75 deaths in 1956, was therefore the commonest type of cancer, and showed an increase over the six year period from 1951 of nearly 50 per cent. Furthermore, 36 of its victims (48 per cent.) were under the age of 65, whereas only 145 (33 per cent.) of all cancer cases were below this age. Of the 75 deaths in 1956, 60 were males and 15 females.

### Coronary Disease

Although an increasing mortality from heart disease appears to be a concomitant of the steadily advancing expectation of life, it is in respect of coronary disease that the most spectacular increases in mortality have occurred. Together with angina pectoris, coronary disease accounted for 366 deaths in 1956, compared with 273 in 1951.

| | 1951 | 1952 | 1953 | 1954 | 1955 | 1956 |
|---|---|---|---|---|---|---|
| Deaths from coronary thrombosis and angina | 273 | 298 | 284 | 349 | 328 | 366 |

Eighty of the 366 deaths from coronary thrombosis in 1956 were below the age of 65 years.

## Notifiable Infectious Diseases—1956

The incidence of infectious disease was generally low during the year. There were 383 cases of measles compared with 1,862 cases in 1955, 53 cases of whooping cough compared with 64 cases in 1955, but cases of scarlet fever increased from 83 to 127.

There were no deaths from any of these diseases, and although these conditions are now generally fairly mild compared with a few generations ago, dangerous sequelae may still occur and it may be dangerous to omit elementary precautions in the way of isolation and rest in bed.

Five cases of poliomyelitis were notified compared with 16 cases the previous year, and although four of them were of the paralytic variety, there were no deaths.

No cases of typhoid or paratyphoid fever occurred, but there were 46 cases of dysentery and 87 cases of food poisoning.

## Food Poisoning

The majority of the cases of food poisoning (63 cases) occurred in a school during March and were due to Cl. welchii, a rather uncommon form of food poisoning organism, but often associated with a pre-cooked meat meal. On this occasion the precise sequence of events leading to the outbreak could not be determined, due to the delay in receiving information about the outbreak.

Of the remaining 24 cases, 23 were due to organisms of the salmonella variety, the commonest type of food poisoning organism, and in one case the origin was not discovered.

Cases occurred as follows :—

| | | | |
|---|---|---|---|
| School outbreak | ... | ... | 63 cases |
| Hotel outbreak | ... | ... | 10 cases |
| Private residences | ... | ... | 14 cases |
| | | | 87 cases |

## NOTIFIABLE DISEASES OTHER THAN TUBERCULOSIS WHICH OCCURRED DURING THE YEAR 1956

| Disease | Total of cases notified | Total deaths |
|---|---|---|
| Scarlet Fever ... ... | 127 | — |
| Whooping Cough ... | 53 | — |
| Acute Poliomyelitis— | | |
| Paralytic ... ... | 4 | — |
| Non-Paralytic ... | 1 | — |
| Measles ... ... | 383 | — |
| Diphtheria ... ... | — | — |
| Acute Pneumonia ... | 53 | 86 |
| Dysentery ... ... | 46 | — |
| Paratyphoid Fever ... | — | — |
| Erysipelas ... ... | 12 | — |
| Meningococcal Infection ... | 2 | — |
| Food Poisoning ... ... | 87 | 1 |
| Puerperal Pyrexia ... | 6 | — |
| Ophthalmia Neonatorum ... | — | — |
| Scabies ... ... | 9 | — |
| Malaria ... ... | — | — |
| Acute Encephalitis ... | 1 | — |

## CASES OF INFECTIOUS DISEASE WHICH OCCURRED DURING 1956

| Notifiable Disease | Number of Cases Notified | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| | At Ages—Years | | | | | | | |
| | At all ages | Under 1 year | 1 and under 5 years | 5 and under 15 years | 15 and under 25 years | 25 and under 45 years | 45 and under 65 years | 65 and upwards |
| Scarlet Fever ... ... ... | 127 | — | 26 | 91 | 10 | — | — | — |
| Whooping Cough... ... ... | 53 | — | 19 | 34 | — | — | — | — |
| Acute Poliomyelitis—Paralytic ... | 4 | — | — | 1 | 1 | 1 | 1 | — |
| Non-Paralytic | 1 | — | — | 1 | — | — | — | — |
| Measles ... ... ... | 383 | 6 | 150 | 219 | 3 | 4 | 1 | — |
| Diphtheria ... ... ... | — | — | — | — | — | — | — | — |
| Acute Pneumonia ... ... | 53 | 2 | 5 | 3 | 6 | 5 | 17 | 15 |
| Dysentery ... ... ... | 46 | 1 | 7 | 30 | 1 | 5 | 2 | — |
| Paratyphoid Fever ... ... | — | — | — | — | — | — | — | — |
| Erysipelas ... ... ... | 12 | — | — | 1 | — | 2 | 5 | 4 |
| Meningococcal Infection ... ... | 2 | 1 | — | 1 | — | — | — | — |
| Food Poisoning ... ... ... | 24 | 2 | 4 | 1 | 5 | 6 | 5 | 1 |
| Puerperal Pyrexia ... ... | 6 | — | — | — | 5 | 1 | — | — |
| Ophthalmia Neonatorum ... ... | — | — | — | — | — | — | — | — |
| Scabies ... ... ... ... | 9 | — | 2 | 2 | 3 | 2 | — | — |
| Malaria ... ... ... ... | — | — | — | — | — | — | — | — |
| Acute Encephalitis ... ... | 1 | — | — | 1 | — | — | — | — |

# Tuberculosis in Bournemouth

During the year, 107 cases of pulmonary and 9 cases of non-pulmonary tuberculosis were notified in the Borough and there were 14 and 4 deaths respectively from these conditions.

A summary of the notifications and deaths from tuberculosis during the last ten years shows little variation in the notifications of pulmonary tuberculosis, a gradual decline in the notifications of non-pulmonary tuberculosis, and a very significant fall in the number of deaths from both forms of the disease.

| | New cases | | Deaths | |
|---|---|---|---|---|
| | Respiratory | Non-Respiratory | Respiratory | Non-Respiratory |
| 1947 ... ... | 124 | 25 | 45 | 13 |
| 1948 ... ... | 118 | 16 | 67 | 6 |
| 1949 ... ... | 109 | 18 | 54 | 8 |
| 1950 ... ... | 80 | 11 | 46 | 1 |
| 1951 ... ... | 127 | 13 | 37 | 2 |
| 1952 ... ... | 141 | 17 | 33 | 5 |
| 1953 ... ... | 98 | 17 | 20 | 2 |
| 1954 ... ... | 136 | 16 | 28 | — |
| 1955 ... ... | 117 | 9 | 12 | 2 |
| **1956** ... ... | **107** | **9** | **14** | **4** |

Insofar as notifications of tuberculosis are mainly received following investigation at the Chest Clinic, they can be fairly considered to indicate the trend of this disease, but that they do not represent the total amount of tuberculosis within the Borough is evidenced by Table II in the Report of the Consultant Chest Physician, which follows. Dr. Tattersall shows that during the past year 323 "new" cases of tuberculosis (309 pulmonary, 14 non-pulmonary) attended the Chest Clinic, of whom 109 were transfers from other districts. The remainder, 203 pulmonary and 11 non-pulmonary cases, either originated in Bournemouth or were diagnosed here for the first time, and as some of these cases were old healed lesions or of small clinical significance they were not notified as suffering from the disease.

It will always be a matter of opinion at what stage a patient should be notified as suffering from tuberculosis. No responsible officer would wish any person to be stigmatised as consumptive, with possible repercussions on employment or to his social embarrassment, without good cause. On the other hand, the number of notifications received in any year is the only method whereby one authority can compare its position with another, and whereby the

Ministry can obtain an overall picture of the state of the public health throughout the country. There is also the possibility that minor, or healed lesions, may extend or break down, and long term planning may be necessary to meet future housing requirements and similar needs.

One other most important observation must be on the numbers of tuberculous patients migrating to Bournemouth. Dr. Tattersall shows that of 1,254 cases of "significant" pulmonary tuberculosis under supervision at the end of the year, no fewer than 35 per cent. of them had come to live in Bournemouth after developing tuberculosis elsewhere, a very high proportion indeed. Furthermore, it will be noted that of the 109 transfers from other districts in 1956, no fewer than 72 out of the 106 pulmonary cases (70 per cent.) were sputum positive.

The location of non-pulmonary tuberculosis in patients of all ages who were notified in Bournemouth during 1956 was :

| Location | Male | Female | Total |
|---|---|---|---|
| Bones and Joints ... ... ... | — | — | — |
| Genito-Urinary System ... ... ... | — | 4 | 4 |
| Glands ... ... ... ... ... | 3 | — | 3 |
| Meninges and Central Nervous System ... | 2 | — | 2 |
| Totals ... ... | 5 | 4 | 9 |

Detailed statistics of new cases of Tuberculosis notified in Bournemouth during 1956 follow :

**PUBLIC HEALTH (TUBERCULOSIS) REGULATIONS, 1952**

| Age periods (years) | Formal Notifications: Number of Primary Notifications of new cases of Tuberculosis | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | 0 to 1 | 1 to 2 | 2 to 5 | 5 to 10 | 10 to 15 | 15 to 20 | 20 to 25 | 25 to 35 | 35 to 45 | 45 to 55 | 55 to 65 | 65 to 75 | 75 and upwards | Total (all ages) |
| Respiratory— | | | | | | | | | | | | | | |
| Males ... | – | – | 1 | – | – | 5 | 12 | 10 | 7 | 8 | 13 | 6 | 2 | 64 |
| Females ... | – | – | – | 1 | 1 | 1 | 2 | 12 | 11 | 6 | 6 | 1 | 2 | 43 |
| Non-Respiratory— | | | | | | | | | | | | | | |
| Males ... | – | – | – | 2 | 2 | – | – | – | – | – | 1 | – | – | 5 |
| Females ... | – | – | – | – | – | 1 | 1 | 1 | – | – | – | 1 | – | 4 |

Particulars of new cases of Tuberculosis notified, and deaths from the disease of Bournemouth residents.

| | New Cases | | | | Deaths | | | |
|---|---|---|---|---|---|---|---|---|
| | Respiratory | | Non-Respiratory | | Respiratory | | Non-Respiratory | |
| | M. | F. | M. | F. | M. | F. | M. | F. |
| Under 1 year .... | — | — | — | — | — | — | — | — |
| 1–5 years .... | 1 | — | — | — | — | — | — | — |
| 5–15 ,, .... | — | 2 | 4 | — | — | — | 1 | — |
| 15–25 ,, .... | 17 | 3 | — | 2 | — | — | — | — |
| 25–45 ,, .... | 17 | 23 | — | 1 | 3 | 2 | — | — |
| 45–65 ,, ... | 21 | 12 | 1 | — | 1 | 2 | — | 1 |
| 65–75 ,, ... | 6 | 1 | — | 1 | 1 | 1 | — | 2 |
| 75 and upwards ... | 2 | 2 | — | — | 3 | 1 | — | — |
| Totals ... | 64 | 43 | 5 | 4 | 8 | 6 | 1 | 3 |

## SECTION 172 OF THE PUBLIC HEALTH ACT, 1936— RELATING TO THE COMPULSORY REMOVAL TO HOSPITAL OF PERSONS SUFFERING FROM TUBERCULOSIS

No action has been taken.

## PUBLIC HEALTH (Prevention of Tuberculosis) REGULATIONS 1925 — RELATING TO PERSONS SUFFERING FROM TUBERCULOSIS IN THE MILK TRADE

No action has been required.

## Report by Dr. W. H. Tattersall, Consultant Chest Physician,

## Tuberculosis in Bournemouth, 1956.

### 1. Chest Clinic Attendances.

TABLE I.

CLINIC ATTENDANCES IN SERIAL YEARS

| Year | Patients attending for the first time | | Refill Treatments | B.C.G. Vaccinations | Other Attendances | Total Attendances |
|---|---|---|---|---|---|---|
| | Fluoroscopy | Other sources (incl. contacts) | | | | |
| 1950 | — | 1,373 | 1,286 | 171 | 3,231 | 5,890 |
| 1951 | 1,158 | 1,102 | 1,870 | | 3,991 | 8,121 |
| 1952 | 1,634 | 1,281 | 2,733 | 115 | 2,378 | 8,026 |
| 1953 | 1,741 | 1,297 | 3,345 | 200 | 4,171 | 10,554 |
| 1954 | 2,274 | 1,075 | 3,639 | 240 | 4,221 | 11,209 |
| 1955 | 1,997 | 1,135 | 2,651 | 349 | 4,192 | 9,975 |
| 1956 | 2,274 | 1,584 | 1,164 | 325 | 5,063 | 10,085 |

### 2. Out-Patient Clinical Sessions.

Three additional fluoroscopy sessions were introduced in the autumn so that each week Bournemouth people now have eight opportunities in five different parts of the town to avail themselves of a chest X-ray if their General Practitioner wishes. As pneumothorax and pneumoperitoneum treatment has been substantially superseded by more intensive chemotherapy, it was found practicable in the Summer to reduce the refill sessions to one each week, and this enabled an additional session to be brought into use for the follow-up of patients under treatment at home.

The fortnightly social conferences continued throughout the year on Saturday mornings. The monthly surgical conferences with Mr. Chin have continued, and 115 cases were jointly considered during the year in this manner.

## 3. New Cases in 1956.

### TABLE II.

**New Cases in 1956 according to diagnosis and source referring the patient.**

| | From 2,274 persons seen at Fluoroscopy Clinics | General Practitioner | Contacts | Mass Radiography | General Hospitals | School Health Service | From other Districts | Other Sources | Total | Group Totals |
|---|---|---|---|---|---|---|---|---|---|---|
| No organic disease found ... ... | 82 | 47 | — | 5 | 1 | 4 | — | 55 | 194 | |
| Acute pulmonary illness | 74 | 18 | — | 2 | — | — | — | — | 94 | |
| Chronic bronchitis and bronchiectasis ... | 44 | 34 | 2 | 8 | — | — | — | 7 | 95 | |
| Lung cancer ... ... | 29 | 10 | — | 5 | 2 | — | — | — | 46 | |
| Other pulmonary conditions (excluding tuberculosis) ... | 67 | 36 | 1 | 14 | 1 | 1 | 1 | 3 | 122 | |
| Other diseases (excluding tuberculosis ... | 43 | 16 | 1 | 1 | 2 | — | — | — | 63 | |
| Total ... | 339 | 161 | 4 | 35 | 6 | 5 | 1 | 65 | | 616 |
| TUBERCULOSIS | | | | | | | | | | |
| Non-pulmonary (including miliary and Meningitis) ... | 2 | 1 | — | — | 8 | — | 3 | — | 14 | |
| Pulmonary : sputum negative (including healed and primary cases and pleural effusions) ... ... | 34 | 15 | 24 | 32 | 5 | — | 34 | 36 | 180 | |
| Pulmonary : sputum or swab positive .. | 15 | 10 | 1 | 4 | 7 | — | 72 | 20 | 129 | |
| Total ... .. | 51 | 26 | 25 | 36 | 20 | — | 109 | 56 | | 323 |
| Still under observation ... ... | 2 | — | — | — | — | — | — | — | | 2 |
| Diagnosis unable to be concluded . | 3 | — | — | — | — | — | — | 1 | | 4 |
| TUBERCULOSIS CONTACTS | | | | | | | | | | |
| Of sputum positive cases ... ... ... ... ... | | | | | | | | | 384 | |
| Of sputum negative cases ... ... ... ... ... ... | | | | | | | | | 308 | |
| Of unclassified cases ... ... ... ... ... ... | | | | | | | | | 57 | |
| TOTAL ... ... ... ... ... ... ... ... | | | | | | | | | | 749 |
| TOTAL ... ... ... ... ... ... ... ... | | | | | | | | | | 1694 |

The data in the foregoing table shows remarkably few significant changes from the corresponding numbers in the previous year.

## 4. Ancillary Investigations.

These are shown in tabular form as follows :—

TABLE III.

Certain Ancillary Investigations

| | | | |
|---|---|---|---|
| Out patient X-ray films ... | 8,523 | Total sputum specimens examined for tubercle bacilli ... ... ... | 1,563 |
| Tomograms ... | 348 | | |
| Bronchograms | 38 | of which cultured | 1,270 |
| X-rays at Herbert Sanatorium | 485 | Laryngeal swabs ... ... | 1,084 |
| Bronchoscopies ... ... | 38 | Drug sensitivities ... | 65 |

It is to be noticed that in addition to examining over a thousand specimens of sputum in search of tubercle bacilli, over a thousand laryngeal swabs were taken from patients who had no sputum in order to maintain a very strict criterion of non-infectivity.

## 5. Discharges.

TABLE IV.

Cases discharged from clinical supervision during 1956

| | After initial investigation | After a period of supervision | Lost sight of | Left the District | Died | Total |
|---|---|---|---|---|---|---|
| Non-Tuberculous | 336 | 140 | 45 | 6 | 24 | 551 |
| Tuberculous | | | | | | |
| Sputum negative | 8 | 12 | 41 | 45 | — | 106 |
| Sputum positive | — | — | 24 | 55 | 8 | 87 |
| Contacts ... | 482 | 114 | 56 | 27 | — | 679 |
| Total ... ... | 826 | 266 | 166 | 133 | 32 | 1423 |

## 6. Hospital Beds.

Linford Sanatorium was closed on the 31st March. Bournemouth patients requiring sanatorium treatment for tuberculosis during the year have been admitted as follows : to the Herbert Sanatorium—73 ; to the Royal National Sanatorium—55 ; to Douglas House—23 ; and elsewhere—28. At no time has there been any significant waiting list or any inconvenience caused to any patient.

Major thoracic surgical operations were arranged for 41 patients as compared with 53 the previous year.

Exactly as last year, 70 patients have been investigated in the six available beds in Christchurch Hospital. This would appear to be about the maximum number of patients that can be investigated with only six available beds because the pressure at times to find a bed for a non-tuberculous case has been very urgent, and a number of people have had treatment in one of the Sanatoria as the only acceptable alternative. Even so, the need for additional general hospital beds for the investigation and treatment of non-tuberculous chest conditions is becoming increasingly urgent. The established sanatoria cannot adequately meet this need because the continuous attention of a House Physician and to have laboratory facilities immediately available are prime requisites in the proper management of many cases.

### 7. Lung Cancer.

Table II shows that 46 cases were diagnosed at the Chest Clinic in 1956 as compared with 41 in 1955, 39 in 1954 and 34 in 1953. Of the 58 known deaths from this disease in Bournemouth during 1956, 30 had been diagnosed at the Chest Clinic.

This disease which is now the commonest form of cancer, killed more than five times as many people in Bournemouth in 1956 as did tuberculosis. The direct association of lung cancer with the habit of cigarette smoking is firmly established. The treatment of lung cancer at present is dishearteningly unsuccessful, but it is perfectly clear that this nation, by substantially renouncing its tobacco smoking habit could prevent the overwhelming majority of these unnecessary deaths. A constructive observation is made by the Chief Medical Officer to the Ministry of Health in his "Report on the State of the Public Health for 1955". He writes : "In several countries the person who wishes to avoid all contact with tobacco smoke is helped to do so by wider and more stringent prohibition of smoking in public transport, cinemas, theatres and other places of indoor entertainment than is the case here".

### 8.—Chronic Bronchitis.

It will be seen from Table VII that there are now 123 patients under regular out-patient surveillance for bronchitis or

bronchiectasis. Many of these people have been substantially helped by physiotherapy and also by discreet use of modern antibiotics. There is no doubt that many bronchitic subjects can be greatly helped to overcome their difficulties in life by appropriate medical care.

During the year, thanks to the help of Dr. King and the Public Health Laboratory, closer bacteriological investigation of these patients has become possible, and the policy has been adopted of offering certain patients immediate admission to hospital for vigorous prompt treatment of any slight exacerbation of their symptoms. There is no doubt that chronic bronchitis offers a challenge to modern medicine, and that more can be done for some of these patients than is commonly realised.

## 9. Tuberculosis.

There were 323 new cases of tuberculosis (Table II) in 1956, as compared with 282 in 1955 and 309 in 1954. Of these, however, only 57 were newly discovered sputum positive cases occurring in Bournemouth as compared with 64 in 1955. Although a national decline in new notifications of tuberculosis has definitely begun, the Bournemouth data do not show any significant change. I am confident, however, that this does not represent any real increase of tuberculous disease in the town. On the contrary, I am quite sure that the amount of new serious tuberculous illness in Bournemouth is diminishing, but in order to pursue a vigorous campaign to achieve complete control of this disease, not only is it being searched out more and more thoroughly, but also cases are being notified which, a decade ago, might well have been passed over entirely. It is only by notification that the responsibilities of the Public Health Department in respect of prevention and after care can properly be brought into action, and it will be noticed throughout this report that the standards adopted for tuberculosis control are now aiming at the total prevention of this disease.

There are now 1,480 tuberculous persons under supervision at the Bournemouth Clinic as compared with 1,327 at the end of 1955. Of these, 671 have at some time been sputum positive, but strict bacteriological tests show that at least 355 of these patients are now rendered non-infectious. At the opposite extreme (see Table

V), there are 49 patients who are still infectious and seem likely to remain so indefinitely. These are the chronic potential spreaders of the disease. Four of them came to Bournemouth during the year from other districts. There are 37 men as compared with 12 women. Only 7 of this group of patients are working or fit to work, and all but one of these seven were working under acceptably satisfactory circumstances. Eighteen of them are confined to bed either at home or in hospital, but the remainder "potter about", and one cannot but wonder just to what extent these unfortunate people are, in fact, responsible for the new cases of tuberculosis which are discovered from year to year.

Mortality rates from tuberculosis are now quite meaningless : two of the deaths from tuberculosis in Bournemouth were patients in hospital who, admitted from elsewhere, had no other address at the time of their death. Another patient was over 80 years of age, and another had refused all treatment offered.

At the end of the year there were 113 insured Bournemouth persons known by the Almoner to be in receipt of sickness benefit for tuberculosis as compared with 115 in the previous year.

The anticipated expansion of home treatment for tuberculosis has developed without any important difficulties. There were 50 patients continuing their treatment at home at the beginning of the year and 110 at the end of the year. This has necessarily increased the work and responsibility falling on the two Tuberculosis Health Visitors and the Home Nursing Service, without whose very close and helpful co-operation this policy of home treatment would be impracticable. One must be particularly grateful to Miss Tonkin and Miss Lane who have both devoted a great deal of time and patience towards making this whole scheme so successful.

The Disablement Resettlement Officer found suitable work for 43 ex-patients on the Chest Physician's recommendation in contrast to 14 who found suitable new work by their own efforts. Of these 43 patients, 6 had been helped by vocational training. Out of 2,067 registered disabled persons in Bournemouth, only 245 are so registered because of their tuberculosis. This would appear to be a surprisingly low proportion of the number of tuberculosis cases eligible for registration.

During 1956 only 10 tuberculosis families were re-housed by the Borough Council in contrast to 21 in 1955.

Attention should be drawn to the considerable number of tuberculosis patients who migrate to Bournemouth from other districts. It will be seen from Table II that in 1956, 109 out of 323 new cases (34 per cent.) of tuberculosis were migrants to Bournemouth. In 1955 the corresponding proportion was 35 per cent., and in 1954 it was 30 per cent. Surprisingly, an age analysis of these migrants in 1956 reveals that only 1 was over the age of 65. However, only 36 per cent. of these patients coming to Bournemouth who had been sputum positive had reached an acceptable standard of non-infectivity on arrival here. Of the 1,254 cases of significant pulmonary tuberculosis under supervision, no less than 35 per cent. are people who have migrated to the town after developing their tuberculosis elsewhere—a very substantial proportion.

No new cases of tuberculosis of any sort have occurred in any of the staffs of any of the hospitals or maternity homes or sanatoria in the town during the year.

Table V shows an even more satisfactory result of all the combined efforts to control tuberculosis than last year. Fifty-three per cent. of all patients who have ever been sputum positive have now definitely become non-infectious as compared with 47 per cent. in 1955, 43 per cent. in 1954, and 29 per cent. in 1953. It is hoped for several years yet to increase this proportion of successful results even further.

**TABLE V**

**Results of treatment of all sputum positive tuberculosis patients on Chest Clinic Register on 31st December, 1956.**

| | Major Surgery | A.P., P.P. or Phrenic inter-ruption | Other measures only | Total |
|---|---|---|---|---|
| | (With chemotherapy in most cases) | | | |
| Persistently sputum positive | 5 | 9 | 35 | 49 (7%) |
| Doubtful infectivity ... | 46 | 28 | 193 | 267 (40%) |
| No longer infectious ... | 120 (70%) | 122 (77%) | 113 | 355 (53%) |
| TOTAL ... ... ... | 171 | 159 | 341 | 671 |

## 10. Contact Supervision.

There has been no variation in the policy of surveillance during the year. Table II shows that 749 persons were examined for the first time during the year as contacts of known patients as compared with 695 the previous year ; in addition, a further 837 people were still under contact surveillance from earlier years. From this total group of 1,586 contacts, no less than 25 new cases of tuberculosis were discovered during the year ; yet once again clearly emphasizing how very well worthwhile such a scheme of contact examination really is toward the detection of tuberculosis. There is no doubt whatever that in the next few years of vigorous endeavour toward control of tuberculosis, contact examination is one of the most important control measures that must be rigorously pursued. Following the policy adopted during 1955, whenever possible chest physicians in other areas have been furnished with the names and addresses of relevant contacts of Bournemouth patients so that contact examination could be offered to these persons.

## TABLE VI.

## HEALTHY CONTACTS ON REGISTER, 31st DECEMBER, 1956.

| | Tuberculin Reaction | | | | Total | Year Surveillance Began | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| | Positive | B.C.G. given | Still Negative | Not known | | Before 1952 | 1952 | 1953 | 1954 | 1955 | 1956 |
| Contacts of positive cases— | | | | | | | | | | | |
| aged 0-5 ... ... ... | 15 | 81 | 14 | 6 | 116 | 29 | 6 | 15 | 10 | 25 | 31 |
| 5-14 ... ... | 78 | 46 | 14 | 10 | 148 | 56 | 14 | 6 | 24 | 23 | 25 |
| 15-34 ... ... | 246 | 50 | 11 | 45 | 352 | 85 | 24 | 23 | 51 | 100 | 69 |
| 35 and over ... | 30 | 1 | 2 | 15 | 48 | 4 | 1 | 7 | 3 | 15 | 18 |
| Contacts of negative cases ... | 70 | 75 | 27 | 15 | 187 | 23 | 25 | 20 | 24 | 43 | 52 |
| Contacts of unclassified cases ... | 28 | 10 | 6 | 5 | 49 | 9 | 4 | 4 | 16 | 4 | 12 |
| TOTALS ... ... ... | 467 | 263 | 74 | 96 | 900 | 206 | 74 | 75 | 128 | 210 | 207 |

## 11.—Tuberculin Testing of School Children.

Towards the end of the Michaelmas term a further tuberculin testing survey of school entrant children was conducted. Dr. Ptaszynski was fortunately available to do this work and the parents of 1,190 school entrants were invited by letter from the Medical Officer of Health to have their children tuberculin tested ; but unfortunately only 614 children brought written parental consent allowing the test to be made. The Heaf test now in common use is a painless and very accurate procedure, and it is disappointing that so many children missed the opportunity to be tested. Allowing for absentees, only a total of 510 children were actually tuberculin tested, but it is highly satisfactory to report that only 7 of these were tuberculin positive, that is approximately only $1\frac{1}{2}$ per cent. Without any doubt there has been a definite fall in the percentage of children infected with tuberculosis before school entry during the past five years ; it will be remembered that in the Autumn of 1951 when 1,177 school entrant children aged five years were tuberculin tested, $2\frac{1}{2}$ per cent. were found to be tuberculin positive. This low proportion of children infected at school entry is a valuable confirmation that the control of tuberculosis in Bournemouth proceeds satisfactorily.

None of the 7 children was found to be in need of immediate treatment, and examination of their family contacts is not complete at the time of writing, but the parent of one child was a new patient who had been discovered by other methods two or three weeks before his child was tuberculin tested.

## 12.—Tuberculosis in Vagrants.

In May it was decided to investigate the amount of tuberculosis occurring among men accommodated in the Reception Centre at Christchurch, and it was arranged that all these men would be required to undergo a chest X-ray examination under Section 19 of the National Assistance Act. Analysis of the results for the first six months showed that of 471 men X-rayed, no less than 77 had abnormal films. The majority of these abnormalities suggested presumably healed tuberculosis, but 18 cases of pulmonary tuberculosis were discovered, notified, and admitted to hospital. A very

disquieting feature of this survey was the disclosure that no less than twelve of these sick men were either working in hotel kitchens or about to start such work.

This is a very high incidence of tuberculosis occurring among what is probably the most hygienically irresponsible and elusive section of the community, and it is obviously a case-finding procedure of considerable value.

## 13. Tuberculosis in Old People.

Tuberculosis is a disease the incidence of which is progressively shifting towards older people, and more than ever before is found in elderly men who readily attribute their symptoms to what they surmise to be bronchitis. During the year an investigation into this problem was begun in Bournemouth. So far it would appear that a considerably higher proportion of men and women over the age of 65 are negative tuberculin reactors than is generally supposed.

## 14. The Clinic Register.

At the end of the year 1,254 cases of significant pulmonary tuberculosis remained under supervision at the Clinic. The sources from which these patients were referred are as follows :—

| | | | |
|---|---|---|---|
| Migrants to Bournemouth | 35% | Contact examination scheme | 6% |
| General Practitioners | 21% | General Hospital ... | 4% |
| Fluoroscopy ... | 14% | Various other sources ... | 9% |
| Mass Radiography ... | 11% | TOTAL ... ... ... | 100% |

A classification of all persons remaining on the Clinic register at the end of the year is shown in Table VII.

**TABLE VII**
**The Clinic Register on 31st December, 1956**

| | No. of cases | | No. of cases |
|---|---|---|---|
| TUBERCULOSIS. | | CONTACTS ... ... ... | 900 |
| Healed disease ... ... | 136 | | |
| Primary infection ... | 33 | OBSERVATION ... ... | 2 |
| Miliary and meningeal disease ... ... | 11 | NON-TUBERCULOUS. | |
| Pleural effusions ... | 43 | No organic disease ... | 18 |
| | | Acute pulmonary illness | 46 |
| Pulmonary, sputum | | Chronic bronchitis ... | 32 |
| negative ... ... | | Bronchiectasis ... ... | 91 |
| O I ... ...301 | | Lung cancer ... ... | 36 |
| O II ... ...213 | | Pneumoconiosis ... | 20 |
| O III ... 4 | | Pulmonary eosinophilia ... | 25 |
| —— | 518 | Other pulmonary conditions | 80 |
| Pulmonary, sputum positive | | Other diseases ... ... | 26 |
| + I ... ... 96 | | | |
| + II ... ...484 | | TOTAL ... ... ... | 374 |
| + III ... 91 | | | |
| —— | 671 | | |
| Non-pulmonary ... | 68 | | |
| TOTAL ... ... | 1480 | TOTAL UNDER SUPERVISION | 2756 |

## Report by Dr. J. Stuart Robertson, Medical Director, Mass Radiography Unit, for the Year 1956.

During the year under review, 12 surveys were carried out in the Borough, and a total of 14,755 were X-rayed. The Unit comprising X-ray van, generator, and a caravan used as an office, was set up at the various centres, but an interesting departure from usual procedure was made at Winton and Moordown where, with the co-operation of the police, the unit operated at various points in or just off the main street. Despite the inclement weather prevailing at the time, this method of encouraging the public to avail themselves of the facilities was very successful.

Tuberculosis in the aged is becoming a more vital problem in the eradication of the disease, as they can be an important reservoir of infection. In conjunction with a colleague working on this subject, inmates of Old Peoples Homes were approached, and through the kindness and help of the Head Postmaster, leaflets were distributed to old age pensioners when they attended for their pensions, giving details of the scheme and asking them to come along for the special sessions arranged. Despite considerable propaganda less than 2 per

cent. of the aged general populace volunteered, and even in the Old Peoples Homes where transport was laid on less than 40 per cent. attended. It would appear that any measure short of compulsion, will meet with little response in getting this group to attend. As a necessary pre-requisite for admission to an Old Peoples Home, an X-ray film of he chest might be regarded as an essential.

The number X-rayed at the various centres was as follows :—

**1956**

| | *Adults* | | *Schoolchildren* | | |
|---|---|---|---|---|---|
| | *Males* | *Females* | *Males* | *Females* | *Total* |
| Pokesdown ... ... ... | 1220 | 1765 | 132 | 119 | 3236 |
| Winton and Moordown ... ... | 1323 | 1842 | 209 | 197 | 3571 |
| National Service, etc. ... ... | 371 | 1 | — | — | 372 |
| Boscombe Secondary School ... | 16 | 8 | 164 | 196 | 384 |
| Telephone House ... ... | 451 | 134 | — | — | 585 |
| Sorting Office ... ... ... | 282 | 26 | — | — | 308 |
| Elderly People, etc. ... ... | 194 | 332 | 1 | 2 | 529 |
| National Service, etc. ... ... | 378 | 6 | — | — | 384 |
| Max Factor ... ... ... | 279 | 390 | — | 1 | 670 |
| Bournemouth Schools ... ... | 137 | 236 | 1466 | 1764 | 3603 |
| Municipal College ... ... | 375 | 382 | — | 19 | 776 |
| National Service, etc. ... ... | 325 | 11 | — | 1 | 337 |
| | 5351 | 5133 | 1972 | 2299 | 14755 |

## STATISTICS

The following gives briefly the main results :

### TABLE I.

| | | |
|---|---|---|
| Number examined ... ... ... ... ... ... | 14,755 | |
| Recalled for large film examination ... ... ... | 247 | (1.67%) |
| Recalled for clinical examination ... ... ... ... | 88 | (0.59%) |
| Referred to Chest Clinic ... ... ... ... ... | 76 | (0.51%) |
| (a) suspect tuberculous ... ... ... ... ... | 55 | (0.37%) |
| (b) probably non-tuberculous ... ... ... ... | 21 | (0.14%) |
| Referred to hospital or doctor ... ... ... ... | 10 | (0.7%) |

### TABLE II (a)

Number referred to the appropriate Chest Clinic as suspect tuberculous—55.

| | | *Male* | *Female* | *Total* |
|---|---|---|---|---|
| 1. | No. of cases diagnosed as active pulmonary tuberculosis— | | | |
| | (a) unilateral disease ... ... ... ... | 3 | 4 | 7 |
| | (b) bilateral disease ... ... ... ... | 2 | 2 | 4 |
| 2. | Tuberculosis, occasional supervision only ... | 4 | 9 | 13 |
| 3. | Suspect tuberculosis, not yet confirmed ... | 2 | 2 | 4 |
| 4. | Classified as inactive tuberculosis, no further action considered necessary ... ... | 3 | 10 | 13 |
| 5. | Found to be non-tuberculous ... ... | 8 | 6 | 14 |
| | | 22 | 33 | 55 |

**TABLE II (b)**

| | | |
|---|---|---|
| *Non-tuberculous cases :* | Referred to Chest Clinic ... ... ... | 21 |
| | Referred to Doctor or Hospital ... | 10 |
| | | 31 |

| | | *Male* | *Female* | *Total* |
|---|---|---|---|---|
| 1. | Cardiovascular lesions ... ... ... ... | 2 | 3 | 5 |
| 2. | Non-tuberculous pulmonary conditions ... | 11 | 10 | 21 |
| 3. | Carcinoma ... ... ... ... ... | 4 | 1 | 5 |
| | | 17 | 14 | 31 |

**TABLE III**

**Age groups examined and incidence of active pulmonary tuberculosis.**

| *Males* | Under 14 | 14 | 15-19 | 20-24 | 25-34 | 35-44 | 45-54 | 55-59 | 60-64 | 65 + | Total |
|---|---|---|---|---|---|---|---|---|---|---|---|
| Examined | 884 | 616 | 1733 | 631 | 854 | 863 | 732 | 286 | 219 | 505 | 7323 |
| Active Cases | | | | 1 | 1 | 1 | | | | 2 | 5 |
| Rate per 1000 | | | | 1.59 | 1.17 | 1.16 | | | | 3.96 | 0.68 |
| *Females* | | | | | | | | | | | |
| Examined | 1192 | 622 | 1106 | 534 | 884 | 898 | 976 | 371 | 248 | 601 | 7432 |
| Active Cases | 1 | | 1 | 2 | | | | 1 | 1 | | 6 |
| Rate per 1000 | 0.84 | | 0.90 | 3.75 | | | | 2.70 | 4.03 | | 0.80 |

## Comment.

Following the full-size film and clinical examination, 86 examinees were referred for further investigation to the Chest Clinic or their own doctor.

After the initial investigation 11 patients were found to be suffering from active tuberculosis, giving an incidence of 0.74 per 1,000 examinations. This finding is low and satisfactory, but is diluted due to the fact that this year 28 per cent. of the examinations made were of schoolchildren in whom the incidence of disease is very low. The figures are too small for statistical analysis but it does show the trend for more active cases to be found in the older age groups.

Amongst the non-tuberculous abnormalities which are giving rise to concern throughout the country is cancer of the lung. Five cases were found, four men and one woman.

# Maternity and Child Welfare

## (Care of Mothers and Young Children)

At the end of 1956 there were 14 Infant Welfare Centres in the Borough providing 18 clinic sessions weekly. The exceptionally heavy demand in the Pokesdown area led to an additional session being provided towards the end of the year, supervised by health visitors. In all other sessions, a doctor and two health visitors are in attendance, together with ladies of the Bournemouth Infant Welfare Voluntary Association.

Once again it must be recorded how very unsatisfactory some of the clinic premises are. Only five of the fourteen premises are owned by the Council, and only in these premises can a reasonable standard of cleanliness, heating and decoration be maintained. In many of the other (usually church) premises, insufficient funds are available for good maintenance, tenancy is often insecure, and both staff and public suffer from a sense of frustration. The valuable educational work undertaken in these clinics surely merits greater consideration, bearing in mind the generally accepted opinion that teachers and pupils in our schools can only give of their best under really good conditions.

In spite of these considerations, attendances of children under 5 years of age increased to 41,286 compared with 38,202 in the previous year, attendances of infants under 1 year of age increasing from 22,514 to 23,460, and of pre-school children from 15,688 to 17,826. Avebury, Castle Lane, Charminster, East Howe, Ensbury Park, Moordown, Northbourne, Kinson, Pokesdown, Strouden, West Cliff and Winton received increased support, and it was noticeable that with the exception of Pokesdown, the greatest advances were made in the Kinson and East Howe areas, where so much Corporation development has, and still is taking place. The decline in attendances at West Howe, from 2,329 to 2,163, undoubtedly reflects the attitude of mothers to the unsatisfactory nature of the clinic premises in this area, and it is to be hoped that in this growing area, where so much remains to be done, the proposed new clinic will soon become a reality.

**ATTENDANCES AT INFANT WELFARE CENTRES, 1956.**

| Clinic | Infants under 1 year | Pre-school Children | Total | Sessional Average |
|---|---|---|---|---|
| Avebury ... ... | 1104 | 674 | 1778 | 35 |
| Boscombe ... ... | 1410 | 800 | 2210 | 43 |
| Castle Lane ... ... | 1603 | 1151 | 2754 | 54 |
| Charminster ... ... | 1334 | 898 | 2232 | 44 |
| East Howe ... ... | 1151 | 1040 | 2191 | 43 |
| Ensbury Park ... | 1511 | 1005 | 2516 | 49 |
| Iford ... ... ... | 1342 | 975 | 2317 | 45 |
| Malmesbury Park ... | 1206 | 1097 | 2303 | 44 |
| Moordown ... ... | 1435 | 1233 | 2668 | 54 |
| Northbourne ... | 1233 | 985 | 2218 | 45 |
| Kinson ... ... | 1652 | 1303 | 2955 | 57 |
| *Pokesdown (a.m.) ... | 101 | 80 | 181 | 23 |
| Pokesdown (p.m.) ... | 1980 | 1480 | 3460 | 68 |
| Strouden ... ... | 948 | 1108 | 2056 | 40 |
| West Cliff ... ... | 1561 | 1033 | 2594 | 53 |
| West Howe ... ... | 1113 | 1050 | 2163 | 42 |
| Winton (a.m.) ... | 1284 | 740 | 2024 | 40 |
| Winton (p.m.) ... | 1492 | 1174 | 2666 | 52 |
| | 23460 | 17826 | 41286 | 47 |

* Commenced 9/11/56

## Ultra Violet Light Clinics

Ultra violet light continued to be provided at Malmesbury Park Clinic, Stewart Road, by physiotherapists of the Regional Hospital Board, and in all 27 children made 403 attendances.

## Welfare Foods

The sale of welfare foods, which was transferred to local authorities by the Ministry of Food during 1954, has continued at all Infant Welfare Centres, and the demand during the two completed years 1955 and 1956 remained fairly constant.

| | 1955 | 1956 |
|---|---|---|
| National Dried Milk (tins) ... ... | 44,505 | 43,268 |
| Cod Liver Oil (bottles) ... ... ... | 14,676 | 13,411 |
| Vitamin A. and D. tablets (packets) ... | 5,652 | 6,166 |
| Orange Juice (bottles) ... ... ... | 79,387 | 85,834 |

## Ante Natal Supervision

In contrast to the increasing support for infant and toddler supervision, ante-natal supervision of expectant mothers as a local

authority function has continued to decline. This is in many ways regrettable, as there have been few ante-natal services equal to those provided by local health authorities in pre-National Health Service days, and there must be a lingering doubt whether, in view of the increased infant mortality and stillbirth rates, the change has been for the better. Adequate ante-natal supervision remains a sine qua non for healthy, happy motherhood, and although it can now be provided through such a variety of agencies, investigations tend to show that many mothers receive little if any care, and that quite unnecessary tragedies still occur from time to time.

During the year two out of the three ante-natal sessions were closed down, one session at Avebury ending in February and the Pelhams session ending in March, leaving only one session per week at Avebury. A total of 391 expectant mothers made a total of 658 attendances, or less than 2 attendances per mother, showing that the majority of them came only for blood and other investigations.

**BIRTHS OCCURRING IN BOURNEMOUTH, 1956.**

| | 1950 | | 1951 | | 1952 | | 1953 | | 1954 | | 1955 | | 1956 | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | No. | % | No. | % | No. | % | No. | % | No. | % | No. | % | No. | % |
| Domiciliary Births | 465 | 20.5 | 433 | 21.2 | 436 | 23.4 | 502 | 26.8 | 571 | 31.2 | 473 | 27.0 | 510 | 27 |
| Institutional Births | 1810 | 79.5 | 1556 | 78.8 | 1425 | 76.6 | 1366 | 73.2 | 1261 | 68.8 | 1282 | 73.0 | 1334 | 72 |
| Totals | 2275 | 100 | 1989 | 100 | 1861 | 100 | 1868 | 100 | 1832 | 100 | 1755 | 100 | 1844 | 100 |

During 1956 the following births were notified as occurring in the Borough :

| | | | |
|---|---|---|---|
| Domiciliary births ... ... | 510 | | |
| Institutional births ... ... | 1334 | Royal Victoria Hospital ... | 671 |
| | | Aston Grays Maternity Home | 341 |
| | | Free Church Council Maternity Home | 40 |
| | | Private Nursing Homes | 282 |
| | | | 1334 |
| Total ... | 1844 | | |

This total is 89 more than in 1955, there having been an increase of 52 in the number of institutional births and an increase in the number of domiciliary births of 37.

### Infectious Diseases Associated with Childbirth

There were 6 cases of puerperal pyrexia, compared with 27 cases in 1955, and of these 4 occurred in hospital and 2 in the home.

No cases of ophthalmia neonatorum were reported, compared with 5 cases in 1955.

### Mothercraft and Relaxation Classes

Mothercraft and relaxation classes have continued to thrive and it was often difficult to accommodate all those who desired such instruction.

Classes in mothercraft were held at Avebury and East Howe for 407 mothers, and 265 mothers attended at Pokesdown and Pelhams for instruction in the art of relaxation.

### Laboratory Tests

Samples of blood for determination of the Wassermann reaction and Rhesus factor were submitted for examination for all mothers attending the ante-natal clinics.

### Family Planning

The Family Planning Association continued weekly clinics at Avebury and twice-monthly sessions at Pelhams, and 30 cases were treated on medical grounds as compared with 37 cases in the previous year. The local authority made the Association a grant in respect of these approved cases.

### Nursery and Child Minders (Regulation) Act, 1948

There are 5 premises registered under this Act, providing accommodation for 67 children.

| Address | No. and age of children accepted | Hours of Opening |
|---|---|---|
| St. Ambrose Hall, Alumhurst Road | 12. 2-5 years | 9.30 a.m. to 12.30 p.m. |
| "Merryland", 5, Wellington Road | 35. 2-5 years | 9 a.m. to 4 p.m. excepting school holidays. |
| 195, Pine Road | 6 3-5 years | 9.30 a.m. to 6.15 p.m. |
| "Clynch", 81, Glenferness Avenue | 14. 2-5 years | 9.30 a.m. to 12.30 p.m. excepting school holidays. |
| 27, Belvedere Road | 10. 2-5 years | 9.30 a.m. to 12.30 p.m. |

**Mother and Baby Homes**

The Council has continued its policy of making grants to the two voluntary mother and baby homes in the Borough, but there is now a growing tendency for unmarried mothers to have their babies away from home, and twelve local girls were maintained in mother and baby homes outside the Borough at the expense of the local authority. This compares with nine admissions of local girls to St. Thomas Lodge and seven to the Free Church Council Home. For comparison, only two local girls were maintained elsewhere in 1955, and twelve local girls were admitted to St. Thomas Lodge and ten to the Free Church Council Home.

**Day Nurseries**

The only remaining local authority day nursery, at 10 Wellington Road, continued to function throughout the year and provided accommodation for up to 45 children. At the end of the year there were 25 children on the register and the average daily attendance was 24.3.

Although the day nursery has never been filled to capacity, in spite of its central position, it serves a very useful purpose as most of the children regularly attending it are priority cases, whose mothers are compelled to work for economic reasons. An additional number of non-priority attendances are made during the summer months when many mothers of young children are absorbed into the hotel trade, and during this period additional staff has been taken on, as required.

Regular medical and dental supervision was maintained throughout the year, and there were no outbreaks of illness of any significance.

# Dental Treatment for Mothers and Young Children, 1956

**Report by A. A. Wood, L.D.S., Principal Dental Officer.**

During the year 1956, dental care was provided for the mothers and young children at each of the four clinics in the Borough. Patients were treated at the clinics nearest to their homes, approximately one session per week at each clinic being devoted to this work. Four dental surgeons were employed, each having the help of a dental surgery assistant. The dental surgeons were also engaged in the School Dental Service.

## Dental Health Education.

A considerable amount of the time spent by the dental surgeons was given to work of an educational nature, this tended to reduce the statistical output per session, but all the demands for treatment were fulfilled, and it has always been our duty to encourage the increasing interest of parents in the care of their children's teeth.

## Co-operation of Other Services.

All mothers attending the ante natal clinics were told by the doctors of the importance of their dental condition, and an appointment for dental inspection and treatment, if required, was offered to all mothers, but those who were receiving regular dental care by their private dentists were advised to continue doing so.

Mothers attending the Infant Welfare Centres were encouraged to bring their children regularly to the clinics for examination and treatment. All the Infant Welfare Centres were periodically visited by the dentists at intervals of approximately four months, for the purpose of giving advice and examining the young children's teeth.

I should like to mention that during my visits to the infant welfare centres I was very favourably impressed by the evidence of the good work done by health visitors in the field of dental health education.

**Visits to Day Nursery.**

The remaining Day Nursery was visited by one of our dental surgeons, Mrs. H. S. Hooper, twice during the year, when the children received dental inspections. Treatment was offered when necessary. I have included details of the findings in the statistical part of this report.

**Royal Victoria Hospital, Boscombe.**

I am grateful to Mr. R. G. Torrens for kindly treating cases of difficulty referred to him at the hospital.

**Facilities for X-rays.**

The X-ray Unit installed at the Central Clinic was used on many occasions and proved to be a very welcome addition to our equipment.

**Provision of Dentures.**

Dentures were made by the very skilled technicians of the Dental Laboratory at the Royal Victoria Hospital, Boscombe. This arrangement proved most satisfactory, and the standard of the work was excellent.

A. A. WOOD,

*Principal Dental Officer.*

# Maternity and Child Welfare

## (a) NUMBERS PROVIDED WITH DENTAL CARE

| | Examined | Needing treatment | Treated | Made Dentally Fit |
|---|---|---|---|---|
| Expectant and Nursing Mothers ... | 106 | 93 | 110 | 76 |
| Children under five ... ... | 802 | 305 | 270 | 238 |

## (b) FORMS OF DENTAL TREATMENT PROVIDED

| | Extractions | Anaesthetics | | Fillings | Scalings or Scaling and gum treatment | Silver Nitrate treatment | Radio-graphs | Dentures provided | |
|---|---|---|---|---|---|---|---|---|---|
| | | Local | General | | | | | Com-plete | Partial |
| Expectant and Nursing mothers | 203 | 44 | 33 | 116 | 19 | Nil | 8 | 21 | 29 |
| Children under five | 191 | 8 | 94 | 539 | Nil | 123 | 2 | Nil | Nil |

## TABLE SHOWING DENTAL CONDITION OF CHILDREN AT THE DAY NURSERY—Year 1956

### Wellington Road

| Age | Number Examined | Number Needing Treatment | Caries Free Teeth | Decayed Teeth | Filled Teeth | Missing Teeth | Total D.F.M. |
|---|---|---|---|---|---|---|---|
| 2 | 9 | — | 164 | Nil | — | — | — |
| 3 | 11 | 1 | 216 | 3 | 1 | — | 4 |
| 4 | 7 | 1 | 127 | 2 | — | 11 | 13 |
| Totals | 27 | 2 | 507 | 5 | 1 | 11 | 17 |

# The Domiciliary Services Provided by the Corporation

A considerable part of the services provided by the local health authority under Part III of the National Health Service Act are of a domiciliary nature, in that the home is the centre of activity rather than the hospital. The work undertaken by these domiciliary visitors, which increases year by year, must represent an enormous saving of money to the community, as many of their patients are thereby spared an often long and expensive stay in hospital.

As noted in the introduction to this Report, certain of the domiciliary services, as for instance midwifery and home nursing, show signs of reaching their peak requirements, although staffing difficulties in hospitals have in the past, and may well again, throw additional burdens on to the domiciliary services.

On the other hand, the need for home helps, and to a certain extent health visitors, is nowhere near satisfied, and it can only be by an expansion of these services that the elderly and aged can be kept out of hospital or hostel, when all many of them require is a little simple nursing and attention. In other words, the local authority has all the basic elements of a complete domiciliary service, but it requires strengthening in some departments if it is to make its maximum contribution to the National Health Service, and at the same time achieve a considerable saving both of money and woman-power.

## DOMICILIARY MIDWIFERY SERVICE

Six full-time midwives were directly employed by the Council and attended 499 confinements (505 births). This was an increase of 34 compared with 1955 and on average each midwife attended 83 confinements, an exceptionally heavy case load in view of the ante-natal and nursing visits associated with each confinement.

Home confinements represented 27.7 per cent. of the total confinements taking place in the Borough, compared with 26.9 per cent. in 1955, and although many of these mothers would prefer to have their babies in hospital, facilities do not exist for more than a proportion of them, and of these, cases with complications or living

in completely unsuitable environments must have priority. The hospital service (Royal Victoria Hospital and Aston Grays Maternity Home) undertook 1,012 confinements during the year, nearly 60 per cent. of the total, and a far higher proportion than can be accommodated in most areas.

The details of places of confinement are as follows :

| | | | | |
|---|---|---|---|---|
| Domiciliary births (Corporation Midwives 505) | | | 510 | (27.7%) |
| Institutional births | Royal Victoria Hospital ... | 671 | | |
| | Aston Grays Maternity Home | 341 | | |
| | Free Church Council Maternity Home ... ... ... | 40 | | |
| | Private Maternity Homes ... | 282 | | |
| | | — | 1,334 | (72.3%) |
| | TOTAL | | 1,844 | |

Details of domiciliary confinements undertaken by the municipal midwives were :

**TABLE I.**

| Total No. of confinements | Primipara | Multipara | No. of Previous Pregnancies | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 |
| 499 | 98 | 401 | 149 | 118 | 78 | 27 | 17 | 8 | 2 | 2 | — |

| Age Groups | | | | | | |
|---|---|---|---|---|---|---|
| 15-20 | 20-25 | 25-30 | 30-35 | 35-40 | 40-45 | 45-50 |
| 25 | 126 | 193 | 108 | 35 | 9 | 3 |

Gas and air analgesia was given in 459 cases and pethidine in 302 cases.

## MATERNITY CASES ATTENDED

| | Number of Deliveries attended by Midwives in the area during 1956. | | | | | |
|---|---|---|---|---|---|---|
| | Domiciliary Cases | | | | | |
| | Doctor not Booked | | Doctor Booked | | | |
| | Doctor present at time of delivery of child | Doctor not present at time of delivery of child | Doctor present at time of delivery of child either the booked doctor or another | Doctor not present at time of delivery of child | Totals | Cases in Institutions |
| (i) Midwives employed by the Authority ... ... ... | 1 | 51 | 151 | 296 | 499 | Nil |
| (ii) Midwives employed by Voluntary Organisations :— | | | | | | |
| (a) Under arrangements with the L.H.A. in pursuance of Section 23 of the National Health Service Act ... ... ... | Nil | Nil | Nil | Nil | Nil | Nil |
| (b) Otherwise (including Hospitals not transferred to the Minister under the National Health Service Act) ... ... | Nil | Nil | Nil | Nil | Nil | 40 |
| (iii) Midwives employed by Hospital Management Committees or Boards of Governors under the National Health Service Act ... ... | Nil | Nil | Nil | Nil | Nil | 997 |
| (iv) Midwives in Private Practice (including Midwives employed in Nursing Homes) ... | Nil | Nil | 1 | 1 | 2 | 97 |
| TOTALS | 1 | 51 | 152 | 297 | 501 | 1134 |

## MEDICAL AID UNDER SECTION 14 (1) OF THE MIDWIVES' ACT, 1951

Number of cases in which medical aid was summoned during the year under Section 14 (1) of the Midwives Act, 1951, by a Midwife :—

| | |
|---|---|
| (a) For Domiciliary cases :— | |
| (i) Where the Medical Practitioner had arranged to provide the patient with maternity medical services under the National Health Service ... ... ... ... ... | 9 |
| (ii) Others ... ... ... ... ... ... ... ... | 1 |
| Total ... ... ... ... ... ... ... ... ... ... | 10 |
| **(b) For cases in Institutions** ... ... ... ... ... ... | 15 |

## HEALTH VISITING

| Year | Expectant Mothers | | Children under 1 year of age | | Children between the ages of 1 & 5 | | Other Cases | |
|---|---|---|---|---|---|---|---|---|
| | Visits | | Visits | | Visits | | Visits | |
| | First | Total | First | Total | First | Total | First | Total |
| 1949 ... | 736 | 1,460 | 1,860 | 10,378 | 22 | 16,128 | 3,213 | 7,031 |
| 1950 ... | 743 | 1,314 | 1,674 | 7,687 | 6 | 12,810 | 1,958 | 5,360 |
| 1951 ... | 809 | 1,507 | 1,601 | 8,262 | 16 | 12,893 | 4,468 | 8,542 |
| 1952 ... | 858 | 1,457 | 1,598 | 8,357 | 10 | 11,350 | 1,507 | 6,190 |
| 1953 ... | 908 | 1,741 | 1 642 | 8,904 | 51 | 11,830 | 488 | 1,657* |
| 1954 ... | 1,100 | 1,991 | 1,592 | 9,080 | 11 | 11,460 | 587 | 1,869† |
| 1955 ... | 1,047 | 1,972 | 1,496 | 9,001 | 38 | 11,712 | 596 | 1,881‡ |
| **1956 ...** | **1,117** | **2,166** | **1,483** | **8,615** | **13** | **12,136** | **755** | **2,705**‖ |

*Includes 223 visits by health visitors to tuberculous households.

†Includes 190 visits by health visitors to tuberculous households.

‡Includes 207 visits by health visitors to tuberculous households

‖Includes 279 visits by health visitors to tuberculous households.

There were also 1,401 visits by the tuberculosis visitor in 1953.

There were also 1,607 visits by the tuberculosis visitors in 1954.

There were also 1,525 visits by the tuberculosis visitors in 1955.

There were also 1,297 visits by the tuberculosis visitors in 1956.

Ineffective visits made by health visitors during 1956 : 3,986.

The record of health visiting during 1956 showed an increase over 1955 of nearly a thousand interviews and nearly four hundred other visits. In the course of the year almost 27,000 personal interviews were given by the Superintendent and 19 Health Visitors, and as many of them were long and difficult, involving the discussion of intimate problems, the statistics barely do justice to the variety and responsibility of the health visitor's work. A personal approach and instruction and advice by word of mouth still remains the most effective method of health education, although it can be helped considerably by the use of visual aids for group education.

The deployment of the health visiting staff remained unchanged, two of them being seconded for full-time duty at the Chest Clinic, and the remainder spending a proportion of their time with the School Health Service, but remaining for all practical purposes "general" health visitors, without any attempt at specialisation.

As in previous years, a great deal of the health visitors' time was spent with expectant mothers and young children, nearly 23,000 visits being made to these groups, or over 75 per cent. of the total.

It is always a matter of opinion whether these special groups should receive such priority, assisted as they are, financially and otherwise, by all the resources of the State, and to the exclusion of other groups such as the aged. On balance it would seem that the present method of selective visiting is the right one, for the expectant mother is particularly receptive of advice and it is all important that the young child should have a solid foundation of physical and mental health. It is good to know, however, that the visits made to the aged almost doubled in 1956, and that where visits were made specifically to expectant mothers and young children, the interview frequently became a family affair, in which the discussions covered a far wider field than one individual's problems.

Various aspects of the health visitor's work may be briefly mentioned :—

## I. Expectant Mothers and Young Children

(1) *An enquiry into the causes of prematurity.*

Visits were made to 46 mothers having premature babies during the year, and although the results of the enquiry were inconclusive in that no new light was shed upon the problem of prematurity, advice was given as to the upbringing of these small babies.

(2) *A breast-feeding survey.*

A breast-feeding follow-up was carried out on about a quarter of the mothers attending relaxation classes during 1956, the result of the enquiry being given below :—

**BREAST-FEEDING SURVEY**
**MOTHERS WHO ATTENDED RELAXATION CLASSES—**
**BABIES BORN IN 1956**

| | 14 *days* | 1 *mth.* | 2 *mths.* | 3 *mths.* | 4 *mths.* | 5 *mths.* | 6 *mths.* |
|---|---|---|---|---|---|---|---|
| Completely breast-fed | 38 | 29 | 21 | 18 | 15 | 12 | 9 |
| Complementary fed | 3 | 5 | 5 | — | — | — | — |
| Bottle fed | 20 | 27 | 35 | 43 | 46 | 49 | 52 |
| TOTAL | 61 | | | | | | |

Little variation was shown between these findings and the larger survey carried out by the domiciliary midwives in 1955, and

it would appear that education for motherhood cannot counteract the disadvantages suffered by so many women today, of which working in full-time employment until a late stage of pregnancy must be one of the greatest.

(3) *Mothercraft Classes in Schools.*

During the spring and summer terms classes in the care of the young baby and toddler were continued at Avonbourne Secondary Modern School, 40 girls being given weekly talks and the syllabus being adjusted so that the girls could enter for the examination held by the National Association for Maternity and Child Welfare.

In the autumn term classes were commenced at Bournemouth School for Girls, for 32 pupils.

(4) *Mothercraft Classes for expectant mothers.*

The increasing popularity of these classes, dealing with the health problems of the expectant mother, preparation for the confinement, and the care of the young baby during the first month of life, was instanced by a second group of classes being started from the East Howe Clinic. Each group of classes covered a two-month period and included educational films and a talk by a midwife on the confinement and the use of the gas and air apparatus.

In all, 407 mothers attended the classes, 338 at Avebury and 69 at East Howe.

(5) *Relaxation Classes.*

A second series of relaxation classes was commenced at Pelhams Clinic in 1956 to supplement those already being carried on at Pokesdown. In addition, the scope of the classes was widened to include any expectant mother referred by a general practitioner in the town, whereas previously the entry had only been through the ante natal clinics at Boscombe Hospital.

The full period of instruction lasted ten weeks, and in all 265 mothers attended 25 courses.

(6) *Talks to husbands.*

These talks, which were started in September, 1955, were planned to cover the care of the baby during its first three months, with a demonstration of bathing and general handling of the new born baby. Six classes were held during the year, attended by 52 husbands, and in response to requests by the husbands a follow-up class was commenced on "Behaviour problems of the toddler".

## II. The Care of the Aged

During the year, 1,486 visits were made to 429 elderly persons, 26 receiving a single visit for investigation purposes, and the remainder receiving as frequent visits as possible.

The circumstances of this latter group were :—

| Age Group | No. | Living Alone / | Married | Separated | Single | Widow | Widower | In One Room | In Rooms | Flatlet | Flat | Cottage | Caravan | House | Bungalow | With friends | With relatives |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 60 - 70 | 96 | 31 | 27 | 2 | 38 | 34 | 2 | 27 | 21 | 4 | 19 | 3 | 2 | 17 | 15 | 1 | 9 |
| 70 - 80 | 161 | 55 | 32 | 4 | 34 | 87 | 12 | 27 | 25 | 6 | 28 | 2 | 1 | 33 | 10 | 1 | 16 |
| 80 - 90 | 138 | 48 | 22 | — | 24 | 65 | 14 | 24 | 14 | 1 | 25 | 5 | — | 39 | 7 | 4 | 9 |
| Over 90 | 8 | 3 | 1 | — | 1 | 6 | — | — | 2 | — | 2 | — | — | 1 | 1 | — | 2 |

| Age Group | In receipt of meals | Home Helps | Private Help | Visited by D. Nurse | Any Living relatives | Known to Welfare Dept. | Member of Club | Visited by Church organ. etc. | Fire guarded with fire guard | Vol. visitors arranged by Health Visitors |
|---|---|---|---|---|---|---|---|---|---|---|
| 60 - 70 | 4 | 25 | 1 | 7 | 36 | 21 | 5 | 12 | 1 | 3 |
| 70 - 80 | 8 | 61 | 2 | 21 | 89 | 27 | 12 | 16 | 10 | 11 |
| 80 - 90 | 13 | 55 | 3 | 12 | 78 | 25 | 10 | 10 | 3 | 14 |
| Over 90 | 1 | 2 | 2 | — | 7 | 1 | 1 | 1 | 2 | — |

*Visits to the chronic sick.*

These visits were made at the request of the Bournemouth and East Dorset Hospital Management Committee in order that the social circumstances of patients recommended for hospital admission on medical grounds might be ascertained, and available to the Group Geriatric Registrar before visiting the patients.

In all, 347 patients were visited, and the final disposal of the patients was as follows :

| | |
|---|---|
| Admitted to chronic sick beds ... ... ... ... | 195 |
| Admitted to chronic sick beds for short stay only ... ... | 2 |
| Cancelled from waiting list ... ... ... ... ... | 54 |
| Non-priority cases (which continued to be followed up) ... | 23 |
| Died before admission ... ... ... ... ... ... | 40 |
| Referred to Welfare Services Department ... ... ... | 8 |
| Admitted to nursing homes ... ... ... ... ... | 9 |
| Admitted to mental hospital ... ... ... ... ... | 4 |
| Admitted to acute beds ... ... ... ... ... ... | 12 |
| TOTAL | 347 |

Although the hospital waiting list is a long one, and in some cases admission was so long delayed that the patient died at home, the health visitors were extremely active during the waiting period, arranging for relatives to give assistance, arranging for home help or district nursing and in many other ways trying to make the lives of these sick old people as comfortable as possible.

*Laundry Service for the aged and chronic sick.*

For administrative reasons, the small laundry service authorised to begin during 1956 did not commence until November. A free service was provided for the patient covering the washing of draw-sheets, mackintoshes, air rings and covers, provided by the Department, the linen being washed by the Boscombe Hospital laundry at a reduced charge.

## III. Problem Families

The Family Case Committee has continued to meet at monthly intervals in 1956.

During this period 12 new and 7 old cases were discussed. The new cases were referred as follows :

| | | |
|---|---|---|
| By the | Medical Officer of Health ... | 6 |
| | Area Officer, N.A.B. ... ... | 3 |
| | Inspector, N.S.P.C.C. ... ... | 1 |
| | Children's Officer ... ... | 1 |
| | Moral Welfare Worker ... | 1 |

Of the 12 new cases, two could be classed as potential problem families, the homes of the children being neglected as a result of the tiredness of the mothers due to illness and frequent pregnancies. In both cases, free home help service for the period of 72 hours, with some material help, brought good results and both families could be said to be rehabilitated.

The Committee also dealt with four families where the fathers were in prison for long periods. In these cases debts outstanding on hire purchase and door trading had resulted in considerable deterioration in home care, and in two cases eviction was threatened. Some financial assistance was given in each case mainly through voluntary channels—clothing, bedding, cots, beds and mattresses were also given. One family responded well to this help, and on the husband's discharge from prison were rehoused. The husband is now in work and the improvement has been maintained. In the other three cases the debts incurred were high, so making it very difficult to do more than see that the rents were paid, avoiding eviction and so keeping the mothers and children together. In these cases the health visitor paid frequent visits to advise on budgeting and, where possible, to prevent further debts accruing.

Other new families had mainly matrimonial problems. These were not easily solved. Visiting was undertaken in three cases by the Probation Officer, Moral Welfare Worker, and the Inspector for the N.S.P.C.C. All are still under review and require constant supervision.

Although the results of the Case Committee meetings are not spectacular, and in some cases little could be said to be achieved, there is no doubt of their value. The health visitor's work is considerably helped by the pooling of all information on the family, and by the financial and other assistance which can be given by the Committee from time to time. The visiting of problem families can be very disheartening, as in so many cases the mothers seem quite incapable of making any effort, in spite of constant promises to do so.

It is obvious that the best results can be achieved with the potential problem families. If these are taken in time it should not be impossible to prevent them becoming "chronic problems".

At the end of 1956 there were 38 established and 164 potential problem families known to health visitors. They received 436 and

742 visits respectively. Some of these families have had as many as six addresses during the year and were not traced for a number of weeks, and so did not receive the frequent visiting which is desirable.

### IV. Health Education Generally

Every opportunity has been taken during the course of personal interviews with parents to stress the value of preventive inoculation against infectious disease, and the simple facts regarding home accidents and their prevention. Similarly, in their visits to old people, the health visitors have pointed out unsafe practices, and the local hospitals have been very co-operative in informing the Department of accidents occurring in the home so that a follow-up visit could be arranged.

Talks have also been given to Townswomen's Guilds and Parent/Teacher Groups on a variety of subjects.

## THE HOME NURSING SERVICE

For the first time since the home nursing service became the responsibility of the local health authority, the number of nursing visits showed a decline, from 83,388 during 1955, to 80,590 in 1956, and although it is too early for more than conjecture, it may be that the continually increasing demand on this service has now been halted, and a period of stability has been reached.

Few services can have made such a great and direct contribution to the National Health Service as home nursing. The contribution of health visiting will be for posterity to judge, and if its achievements in a wider sphere can equal its achievements in child welfare during the last few decades, its position is assured for all time. But the impact of the home nursing service has been immediate, in that it has daily freed hospital beds for cases requiring specialist treatment, it has enabled many people to whom hospitals are anathema to spend their last few weeks in comfort in familiar surroundings, and together with the domestic help service, it has made a greater contribution to the welfare of the elderly at home than any other organisation, and at a fraction of the cost.

During 1956, a total of 3,992 patients received home nursing treatment, 3,269 being new patients and 723 being carried over on

the register from 1955. The age distribution of these patients is given below, and it will be noted how many of the calls on the home nursing service concerned elderly people, often with chronic and protracted illnesses, requiring many visits.

| | *Patients nursed* | | | |
|---|---|---|---|---|
| | *Male* | *Female* | *Total* | *Percentage* |
| 0- 4 years ... | 28 | 13 | 41 | 1.0 |
| 5-14 years ... | 46 | 36 | 82 | 2.1 |
| 15-24 years ... | 34 | 95 | 129 | 3.2 |
| 25-44 years ... | 132 | 344 | 476 | 11.9 |
| 45-64 years ... | 386 | 667 | 1053 | 26.4 |
| 65-74 years ... | 326 | 665 | 991 | 24.8 |
| 75- years ... | 384 | 836 | 1220 | 30.6 |
| | 1336 | 2656 | 3992 | 100.0 |

## New patients attended during 1956

The 3,269 patients receiving nursing treatment during 1956 covered a wide variety of conditions, many of them requiring considerable nursing care in addition to the administration of medicaments. An increasing amount of preliminary treatment has been carried out prior to the admission of patients to hospital, as for instance bowel washouts before X-ray examinations, and final dressings following operation have frequently been carried out by the home nurse after the patient has returned home from hospital.

| *Complaint* | *No. of Cases* |
|---|---|
| Tuberculosis ... ... ... ... ... | 126 |
| Respiratory system (other than T.B.) ... ... | 330 |
| Heart and Circulatory system ... ... ... | 687 |
| Digestive system ... ... ... ... ... | 487 |
| Reproductive system ... ... ... ... | 135 |
| Nervous system ... ... ... ... ... | 91 |
| Urinary system ... ... ... ... ... | 151 |
| Cancer ... ... ... ... ... ... | 162 |
| Diabetes ... ... ... ... ... ... | 101 |
| Injuries, burns, etc. ... ... ... ... ... | 197 |
| Senility ... ... ... ... ... ... | 164 |
| Rheumatism ... ... ... ... ... ... | 78 |
| Leg Ulcers and Skin conditions ... ... ... | 196 |
| Ear, Nose and Throat conditions ... ... ... | 101 |
| Preparation for hospital treatment ... ... | 209 |
| Miscellaneous conditions ... ... ... ... | 54 |
| | 3,269 |

New patients were referred to the home nursing service by :

| | |
|---|---|
| General Practitioners ... ... ... ... | 2,311 |
| Hospitals ... ... ... ... ... ... | 579 |
| Personal application... ... ... ... ... | 243 |
| Voluntary agencies ... ... ... ... ... | 12 |
| Public Health Department and Chest Clinic ... | 124 |
| | 3,269 |

During the year 3,272 cases were removed from the register owing to :

| | |
|---|---|
| Removal to hospital ... ... ... ... | 502 |
| Died ... ... ... ... ... ... ... | 335 |
| Satisfactory outcome of the case ... ... ... | 2,435 |
| | 3,272 |

## The Nursing of Sick Children

Although the nursing of sick children has dwindled considerably, and only 3 per cent. of the cases treated during 1956 were children, this side of the work is important as serious consequences may follow neglect in childhood. Home nurses attended children on their own districts and injections (usually penicillin), enemata for worms, treatment of ear discharges and wound dressings accounted for most of their visits.

### CHILDREN AGED 0-4 YEARS

| *Condition* | *Patients* | *No. of Visits* |
|---|---|---|
| Infectious disease ... ... | 1 | 3 |
| Respiratory disease ... ... | 7 | 32 |
| Tonsils and Adenoids ... | 1 | 5 |
| Ear disease ... ... ... | 5 | 21 |
| Medical conditions ... ... | 18 | 137 |
| Surgical conditions ... ... | 9 | 57 |
| TOTALS ... | 41 | 255 |

### CHILDREN AGED 5-14 YEARS

| *Condition* | *Patients* | *No. of Visits* |
|---|---|---|
| Infectious disease ... ... | 6 | 88 |
| Respiratory disease ... ... | 9 | 46 |
| Tonsils and Adenoids ... | 4 | 7 |
| Ear disease ... ... ... | 12 | 64 |
| Medical conditions ... ... | 37 | 220 |
| Surgical conditions ... ... | 9 | 68 |
| TOTALS ... | 77 | 493 |

## The Treatment of Visitors

It has become increasingly common for visitors to the town to request the continuance of treatment begun elsewhere. During the year, 240 visitors received 2,236 nursing visits, many of them to receive insulin or other injections.

## Injection Therapy

During the last few years, treatment by the injection of antibiotics, vaccines and other substances has replaced many former and familiar nursing techniques, and the tremendous advances in medical knowledge have required great efforts on the part of home nurses to keep "up to date". The Refresher Courses organised by various nursing organisations have been of considerable assistance, for the busy nurse has little free time for study of the medical and nursing journals.

During the year, 1,588 patients received a total of 37,645 separate injections, daily injections being given to 715 patients and twice daily injections to 121 patients. The variety of injections prescribed can be judged by the table given below :

| *Injection* | *No. of patients* | *Daily visits* | *Twice daily visits* | *Thrice daily visits* | *No. of injections* |
|---|---|---|---|---|---|
| Morphia ... ... | 9 | 3 | 4 | 1 | 144 |
| Pethidine ... ... | 3 | 2 | 1 | — | 121 |
| Omnopon ... ... | 6 | 1 | 2 | — | 77 |
| Insulin ... ... | 143 | 139 | — | — | 13,707 |
| Penicillin ... ... | 624 | 482 | 106 | — | 4,113 |
| Streptomycin ... | 124 | 61 | 3 | — | 4,486 |
| A.C. T.H. ... ... | 9 | 2 | — | — | 342 |
| Vitamins ... ... | 200 | 6 | — | — | 4,198 |
| Vaccines ... ... | 16 | — | — | — | 263 |
| Diuretics ... ... | 300 | 3 | — | — | 6,922 |
| Liver Extract ... | 66 | 1 | — | — | 2,206 |
| Testisterone ... | 11 | — | — | — | 206 |
| Largactil ... ... | 4 | 3 | — | — | 31 |
| Calcium ... ... | 5 | — | — | — | 36 |
| Iron ... ... ... | 35 | — | — | — | 488 |
| Gold ... ... | 4 | — | — | — | 36 |
| Others ... ... | 29 | 12 | 5 | — | 269 |
| TOTALS ... ... | 1,588 | 715 | 121 | 1 | 37,645 |

## Late Visits

Each home nurse was responsible for her own area of the Borough, and in respect of visits made between 8 p.m. and 8 a.m., 256 such calls were received during the year.

The establishment of home nurses has remained as before, consisting of a Superintendent Nurse, a Senior Nurse, and 24 Home Nurses, all working from their own homes but with a central office at "Avebury", 10 Madeira Road.

At the end of the year, 720 cases remained on the treatment register, receiving visits as follows :

| *Twice Daily* | *Daily* | *Alternate days* | *Twice weekly* | *Thrice weekly* | *Weekly* | *Fort-nightly* | *Monthly* |
|---|---|---|---|---|---|---|---|
| 8 | 95 | 33 | 135 | 53 | 238 | 69 | 89 |

A summary of the year's work, and a comparison with previous years, was as follows :

| | 1950 | 1951 | 1952 | 1953 | 1954 | 1955 | **1956** |
|---|---|---|---|---|---|---|---|
| Number of patients on the Register, 1st January ... | 366 | 432 | 473 | 523 | 550 | 651 | **723** |
| Number of new patients attended ... ... ... | 2645 | 2748 | 2859 | 3072 | 3174 | 3407 | **3269** |
| Total number of patients attended ... ... ... | 3011 | 3180 | 3332 | 3595 | 3724 | 4058 | **3992** |
| Number remaining on the Register on 31st December | 432 | 473 | 523 | 550 | 651 | 723 | **720** |
| Number of patients taken off the Register ... ... | 2579 | 2707 | 2809 | 3045 | 3073 | 3335 | **3272** |
| Total number of nursing visits | 62,746 | 66,594 | 69,086 | 70,587 | 74,595 | 83,388 | **80,590** |

**The illnesses of patients were classified as follows :**

| | 1950 | 1951 | 1952 | 1953 | 1954 | 1955 | **1956** |
|---|---|---|---|---|---|---|---|
| Tuberculosis ... ... | 20 | 36 | 78 | 83 | 70 | 89 | **126** |
| Pneumonia ... ... ... | 71 | 87 | 113 | 102 | 66 | 88 | **95** |
| Miscarriages, etc. ... ... | 3 | 6 | 37 | 7 | 8 | — | **6** |
| Surgical ... ... ... | 408 | 393 | 516 | 382 | 549 | 684 | **656** |
| Medical ... ... ... | 2509 | 2643 | 2554 | 2978 | 3017 | 3150 | **3098** |
| Infectious diseases ... ... | — | 15 | 34 | 43 | 14 | 47 | **11** |
| | 3011 | 3180 | 3332 | 3595 | 3724 | 4058 | **3992** |

## DOMESTIC HELP SERVICE

Domestic help can be provided, by the terms of Section 29 of the National Health Service Act, to households "where such help is required owing to the presence of any person who is ill, lying in, an expectant mother, mentally defective, aged, or a child not above compulsory school age within the meaning of the Education Act, 1944".

It is therefore a service of very wide application, but of recent years an increasing amount of help has been given to old age and chronic sickness, cases which by their very nature tend to be protracted, so that with the same staff establishment as during 1955, no material increase has been possible in the number of cases assisted (1,013 cases compared with 1,011 cases in 1955). The number of hours' service, however, increased from 78,285 to 86,326.

A summary of the work carried out by the Organiser and 69 Helps is as follows :

| *Type of Case* | *Number* | *Hours spent* | *Percentage of Total Hours* | *Average hours per case* |
|---|---|---|---|---|
| Old age ... ... ... | 592 | 56,723 | 65.7 } 93.0 | 95.8 |
| Illness ... ... ... | 303 | 23,566 | 27.3 } | 77.8 |
| Tuberculosis ... ... | 21 | 2,573 | 3.0 | 122.5 |
| Confinements ... ... | 47 | 1,607 | 1.85 | 34.2 |
| Mental Deficiency ... | 9 | 940 | 1.1 | 104.4 |
| Maternity and Child Welfare | 39 | 868 | 1.0 | 22.3 |
| Problem families ... ... | 2 | 49 | 0.05 | 24.5 |
| TOTALS ... | 1013 | 86,326 | 100.00 | 85.2 |

**Classification of cases served (by ages).**

| | | |
|---|---|---|
| Under 15 years ... ... ... | 39 | (3.9%) |
| 15-64 years ... ... ... | 309 | (30.5%) |
| 65 years and over ... ... | 665 | (65.6%) |
| | 1,013 | |

As in previous years, families with a tuberculous or mentally defective member received on average a greater amount of help than those in any other category, but the numbers involved were small, and the main reason for the increase of total hours worked was that the amount of help given to the aged increased from 84.2 hours in 1955 to 95.8 hours in 1956.

The need for an increase in the Domestic Help Service has been very clearly established during the last few years, as more and more aged and ailing persons have come to the notice of the Department through the agency of family doctors, health visitors and voluntary organisations.

## Ambulance Service

The ambulance arrangements in 1956 remained unchanged from previous years, being a combination of services directly provided by the Council, an agency arrangement with the St. John Ambulance Association, and the supplementary use of the Hospital Car Service. In the case of long journeys, train facilities were used wherever possible, for not only was this a far cheaper method of transport, but the small fleet of ambulances cannot possibly undertake many out of town journeys without detriment to the internal emergency service. In deciding the need for long ambulance journeys, the local doctors have been most helpful and when train facilities have been used British Railways have co-operated in every way.

During 1956 the number of patients carried by the local authority service exceeded by over 4,000 the maximum carried in any previous year, and reference to the table below shows that this total, $3\frac{1}{2}$ times the number carried in1949, was achieved on a mileage only 80 per cent. greater than in that year. The radio link between the Council's ambulances and the Central Ambulance Station has proved a very wise investment and without it, economies on the scale mentioned would have proved impossible.

**TABLE SHOWING PATIENTS CARRIED AND MILEAGES COVERED BY AMBULANCE SERVICE SINCE 1949**

| Year | Local Authority | | St. John Association | | Hospital Car Service | | Total | |
|---|---|---|---|---|---|---|---|---|
| | Patients | Mileage | Patients | Mileage | Patients | Mileage | Patients | Mileage |
| 1949 | 7,990 | 82,824 | 1,736 | 30,513 | 7,141 | 89,997 | 16,867 | 203,334 |
| 1950 | 11,937 | 100,634 | 2,545 | 31,325 | 7,438 | 82,431 | 21,920 | 214,390 |
| 1951 | 12,335 | 103,192 | 2,973 | 25,401 | 13,132 | 82,467 | 28,440 | 211,060 |
| 1952 | 15,340 | 110,424 | 3,160 | 21,391 | 15,639 | 71,425 | 34,139 | 203,240 |
| 1953 | 18,782 | 127,334 | 2,159 | 13,619 | 17,446 | 73,258 | 38,387 | 214,211 |
| 1954 | 20,683 | 127,975 | 268 | 1,228 | 17,353 | 71,456 | 38,304 | 200,659 |
| 1955 | 23,104 | 142,991 | 163 | 1,131 | 18,241 | 69,740 | 41,508 | 213,862 |
| **1956** | **27,409** | **148,584** | **271** | **1,430** | **18,006** | **72,625** | **45,686** | **222,639** |

In regard to the average number of miles covered for every patient carried, there has been an almost continuous fall in each component part of the service since 1949, and both the local hospitals and the general practitioners in the town have done their utmost to effect economies in the use of the service where possible.

| *Year* | *Average miles covered per patient carried* | | | |
|---|---|---|---|---|
| | *Local Authority* | *St. John Association* | *Hospital Car Service* | *Total all Services* |
| 1949 | 10.36 | 17.57 | 12.60 | 12.05 |
| 1950 | 8.43 | 12.31 | 11.08 | 9.77 |
| 1951 | 8.36 | 8.53 | 6.27 | 7.42 |
| 1952 | 7.19 | 6.76 | 4.56 | 5.95 |
| 1953 | 6.78 | 6.30 | 4.19 | 5.58 |
| 1954 | 6.18 | 4.58 | 4.11 | 5.23 |
| 1955 | 6.18 | 6.94 | 3.82 | 5.15 |
| **1956** | **5.42** | **5.28** | **4.03** | **4.87** |

During 1956 the average number of patients per journey, together with the average number of miles each patient was carried was as follows :

| *Service* | *Average patients per journey* | *Average miles per patient* |
|---|---|---|
| Local Authority ... ... ... | 4.27 | 5.42 |
| St. John Ambulance Association | 1.92 | 5.28 |
| Hospital Car Service ... ... | 3.40 | 4.03 |
| Rail Transport ... ... ... | 1.00 | 134.93 |

During the year, a fire at the Engineer's East Yard resulted in a complete loss of one Austin ambulance and the Tuberculosis Health Visitor's car, both of which were at this yard for repair.

Emergency arrangements included the hire on very generous terms of an ambulance from the St. John Ambulance Association, and the increased use of the agency arrangement with the same organisation.

The burned vehicles were eventually replaced by a new Morris ambulance and a Bedford Utilicon vehicle.

## THE WORK DONE BY THE SERVICE DURING 1956 IS SHOWN IN THE FOLLOWING TABLE

| Service | Vehicles (Number at 31.12.56) | Patient Carrying Journeys | Patients Carried | | Abortive and Service Journeys | Transport of Analgesia Apparatus, Midwives, etc. | Total Mileages | Transport by Rail | | No. of Staff at 31.12.56 |
|---|---|---|---|---|---|---|---|---|---|---|
| | | | Accident or Emergency | Other | | | | No. | Rail Miles | |
| Directly provided | Ambulances (5) | 3,885 | 1,614 | 13,310 | 202 | 7 | 82,416 | 108 | 14,228 | 23 |
| | Bedford Dual purpose (2), | 1,632 | 225 | 8,770 | 100 | 58 | 42,920 | 144 | 19,775 | — |
| Ditto | Car (1) | 895 | 87 | 3,403 | 73 | 66 | 23,248 | — | — | — |
| St. John Assn. | Ambulances (2) | 141 | — | 271 | — | — | 1,430 | — | — | 2 |
| Hospital Car Service | Cars | 5,289 | — | 18,006 | 99 | — | 72,625 | — | — | — |
| | | 11,842 | 1926 | 43,760 | 474 | 131 | 222,639 | 252 | 34,003 | 25 |

# Vaccination and Immunisation

In addition to offering protection against diphtheria and whooping cough as in previous years, a beginning was made in the use of a combined antigen for protecting against diphtheria, whooping cough and tetanus by one series of injections. The Ministry of Health scheme for poliomyelitis vaccination was also inaugurated during the late spring.

There is no doubt that many parents are bewildered by the multiplicity of vaccinations, immunisations and diagnostic injections now available to their children, and this in spite of every opportunity being taken for explanation. The use of combined antigens which would protect against several diseases at once was therefore a tremendous advance for the parents' sake as much as the child's, and it is most unfortunate that recent Ministry advice has vetoed the use of such short-cut methods of protection and has recommended the return to single disease protection.

The Ministry poliomyelitis vaccination scheme called for the registration of children born between 1947 and 1954, and of 11,470 eligible children, 5,635 were registered by their parents. Due to the small supplies of vaccine available, only 613 were protected during 1956.

## Vaccination against Smallpox

The numbers dealt with were as follows :

| | |
|---|---|
| By General Practitioners ... ... ... ... | 1,141 |
| By Local Health Authority's staff... ... ... | 385 |

| | *Under 1 year* | *Aged 1 year* | *Aged 2-4* | *Aged 5-14* | *Aged 15 or over* | *Total* |
|---|---|---|---|---|---|---|
| Primary vaccinations | 795 | 16 | 20 | 50 | 126 | 1,007 |
| Re-vaccinations ... | — | 2 | 14 | 64 | 439 | 519 |
| TOTALS ... | 795 | 18 | 34 | 114 | 565 | 1,526 |

## Diphtheria Immunisation

Number of children immunised during 1956 by :

| | |
|---|---|
| Public Health Department ... ... ... | 653 |
| Private doctors ... ... ... ... ... | 569 |

Number of children who received reinforcing dose during 1956 by :

| | |
|---|---|
| Public Health Department ... ... ... | 1,511 |
| Private doctors ... ... ... ... ... | 363 |

### Whooping Cough Immunisation

During the whole of the year, a combined diphtheria/whooping cough vaccine was used whenever possible, the Ministry advice regarding the use of combined vaccines not applying to the period under review.

1,275 children were protected in this way against both diseases, and 5 against whooping cough alone.

## Prevention of Illness—Care and After Care

The Care and Aftercare Service, instituted in 1948 under the provisions of Section 28 of the National Health Service Act, has obviously tremendous potentialities in the prevention of illness and the rehabilitation of its victims. Unfortunately there has never been an opportunity of fully implementing this Section of the Act, nor is there likely to be, until the local authority health services receive a much more generous apportionment of the National Health Service exchequer grant.

Those functions now carried out under the heading of Care and Aftercare are almost entirely a continuation of functions already being undertaken by local authorities prior to the Act, but under different legislation, and little if anything has developed under the grandiose title of "Prevention of Illness", which should be the prime function of a public health service. There is, in addition, a not inconsiderable amount of overlapping between the public health and other departments, particularly in that borderland of social welfare where there is only a shadowy legislation and where the Ministry can apparently offer no guide to the traveller.

Under the arrangements at present in force, cases of sickness and their families are being helped in the following ways :

(1) **Tuberculosis.** There is close co-operation with the Chest Physicians in Bournemouth and two health visitors have been seconded for full-time work in the Chest Clinics and in the homes of tuberculous patients. The Council also pays a proportion of the salary of the Almoner of the Sanatoria Management Committee, and of the Occupational Therapist when working with domiciliary cases.

Other facilities include :

(a) Boarding out of child contacts.

(b) Assistance in securing adequate housing accommodation.

During the year 18 recommendations were made and 10 cases were rehoused, only 2 of these being included in the 18 cases recommended during the year.

(c) Provision of nursing requisites.

(d) Provision of domestic help. During the year 21 tuberculous patients received 2,573 hours help.

(e) Rehabilitation of selected cases. During 1956 the local health authority accepted responsibility for two cases at Papworth Hall, Cambridge, and two cases at Enham Alamein.

(f) The local authority makes a grant to the Bournemouth Voluntary Tuberculosis Care Committee in respect of their work for the tuberculous patient and his family, consisting of monetary payments, extra nourishment, provision of bedding, coal, etc.

(g) Occupational therapy for patients in their own homes. During the year 47 patients were helped in this way, the local authority being responsible for that proportion of the occupational therapists' time spent in the training of domiciliary patients. 13 continued from previous year, 34 new patients during 1956. 277 visits paid.

(2) **Venereal Diseases.** A health visitor attended the Special Clinic at the Royal Victoria Hospital and helped with tracing defaulters from treatment.

(3) **Illness Generally.** Provision was made at rest homes for the convalescence of patients recommended by general practitioners or hospital consultants. During the year 41 persons received recuperative holidays, compared with 41 in 1955. Rest homes are fairly selective in the type of case they receive, as they rarely have trained staff to undertake nursing duties, and for this reason all applications could not be met. The cost to the patient was based on income, but the majority of beneficiaries under the scheme paid little if anything. All patients who had been away in rest homes were visited on their return home by a health visitor, and almost invariably had benefited considerably in health.

Articles of sick room equipment were issued on loan as required, at the request of general practitioners or hospitals. Over 600 articles were issued during the year, those in most frequent demand being mackintosh sheets (187), bed rings (123), bedpans (110), urinals (57) and wheel chairs (32).

## Mental Health Services

Admissions to mental hospitals during 1956 showed a continuation of the upward trend evidenced since 1948, and the total of 351 admissions was the highest ever recorded from the Borough.

The transformation of mental hospitals during recent years from dull, depressing places to bright imaginatively decorated premises, the development of new techniques in treatment, of occupational therapy and of a far better patient-staff relationship has probably had as great an effect upon the admission rate as any real increase in mental illness. Through radio programmes, television, newspaper articles and the influence of recovered mental patients, the general public is gradually losing its fear of mental hospitals and fast coming to realise that there is no essential difference between the treatment of physical and mental illness.

**TABLE I.**

**ADMISSIONS TO MENTAL HOSPITALS DURING LAST 5 YEARS**

| *Year* | *N.D.* | *V.* | *T.* | *Sec.* 11 | *Sec.* 14 *etc.* | *Sec.* 20 | *Total* |
|---|---|---|---|---|---|---|---|
| 1952 | — | 121 | 5 | — | 91 | — | 217 |
| 1953 | — | 132 | 2 | — | 102 | — | 236 |
| 1954 | — | 139 | 3 | 2 | 95 | 2 | 241 |
| 1955 | 11 | 166 | 10 | 2 | 95 | 42 | 326 |
| **1956** | **103** | **80** | **15** | **8** | **98** | **47** | **351** |

The statistics given in Table I show that although the total Bournemouth admissions have steadily increased from 217 in 1952 to 351 in 1956, an increase of over 60 per cent. in five years, the

number of certified admissions has remained virtually unchanged, the increase being almost entirely due to those forms of admission requiring the minimum of documentation and formality. The development of Pinewood House at Park Prewett Hospital at the end of 1955 as "non-designated premises", where patients could be admitted without formality and solely on a psychiatrist's recommendation, has completely changed the picture of mental hospital admissions, and this form of entry for treatment has now become the commonest of all.

In spite of very real advances in the treatment of mental illness, there remains a hard core of severe and chronic disease that has so far resisted all known therapy, and nearly 50 per cent. of patients in mental hospitals have been there for ten years or more. Many of these suffer from schizophrenia, a condition usually beginning in adolescence or early adult life, which leads to a progressive dementia, although there may be periods of remission when a near-normal mental condition is re-established. It is easy to understand the hesitation of relatives to receive a patient home again when there is a danger of a relapse into violently anti-social behaviour.

**TABLE II.**

**ALL PATIENTS ADMITTED TO DESIGNATED AND NON-DESIGNATED PREMISES DURING 1956**

| | *Males* | | | | | | *Females* | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Age | N.D. | V. | T. | Sec. 11 | Sec. 14 etc. | Sec. 20 | N.D. | V. | T. | Sec. 11 | Sec. 14 etc. | Sec. 20 | Total |
| 10-20 | — | — | 1 | — | 1 | 1 | 1 | — | — | — | — | 1 | 5 |
| 20-30 | 1 | 3 | — | — | 5 | 1 | 5 | 5 | — | 1 | 4 | 2 | 27 |
| 30-40 | 13 | 2 | — | 2 | 7 | 1 | 9 | 10 | — | 1 | 8 | 2 | 55 |
| 40-50 | 8 | 4 | — | 1 | 5 | 4 | 16 | 5 | 1 | — | 10 | 4 | 58 |
| 50-60 | 13 | 9 | 1 | 1 | 7 | 2 | 10 | 8 | 1 | — | 12 | 8 | 72 |
| 60-70 | 5 | 4 | 1 | — | 6 | 4 | 12 | 18 | 4 | — | 15 | 6 | 75 |
| 70-80 | 4 | 4 | 1 | — | 6 | 3 | 3 | 5 | 2 | 1 | 7 | 5 | 41 |
| 80 plus | 3 | 2 | 1 | — | 3 | 1 | — | 1 | 2 | 1 | 2 | 2 | 18 |
| ALL AGES | 47 | 28 | 5 | 4 | 40 | 17 | 56 | 52 | 10 | 4 | 58 | 30 | 351 |

Table II gives the age distribution of the 351 patients admitted to hospital during 1956, and shows very clearly the increasing risk of mental illness as age advances and responsibilities grow heavier.

Following retirement from work the danger of real mental illness seems to diminish, and much of the mental disorder of old age is a truly senile change, a part of the general deterioration of the whole body structure.

The treatment of old people with mental symptoms causes probably more concern than that of any other age group, particularly if certification is required. It must be remembered, however, that although in many cases the condition is a purely senile one, in others the condition is similar in every way to mental illness in a younger person and its treatment requires the skilled medical and nursing techniques only available in a mental hospital. On the other hand mental symptoms may arise as a temporary phenomenon in a physical illness or may herald the final dissolution.

Whatever the aetiology of mental symptoms in an aged person, there is often doubt in the initial stages whether the condition is amenable to treatment and there seems every justification for attempting informal action in the first place, leaving certification as a very last resort. To this end, the provision of special mental blocks attached to geriatric hospitals and an increase in the number of observation (Section 20) beds in mental hospitals is urgently required.

**TABLE III.**

**PATIENTS ADMITTED, UNDER SECTION 20, DURING 1956**

| *Method of Disposal* | *Males* | *Females* | *Total* |
|---|---|---|---|
| Died in hospital ... ... ... ... ... | 1 | 2 | 3 |
| Certified ... ... ... ... ... ... | 6 | 15 | 21 |
| Transferred to other mental hospitals ... | 1 | 2 | 3 |
| Transferred to general hospitals ... ... | 1 | — | 1 |
| Became Temporary Patients ... ... ... | 1 | 1 | 2 |
| Became Voluntary Patients ... ... ... | 2 | 5 | 7 |
| Discharged "Not of unsound mind" ... ... | 5 | 5 | 10 |
| TOTALS ... | 17 | 30 | 47 |

Table III shows the value of observation beds when the precise diagnosis is in doubt. Out of a total of 47 admissions in this category, ten recovered sufficiently to be discharged as "not of unsound mind", one (a man of 74) was transferred to a general hospital, while three (a man of 75, and women aged 83 and 50) died

in hospital. In the remaining 33 cases (70 per cent.) the significance of their mental symptoms was confirmed and steps were taken to provide appropriate treatment, either under the Lunacy Act or the Mental Treatment Act.

## MENTAL DEFICIENCY ACTS, 1913-1938.

During the year, 17 new cases of mental deficiency were added to the Register, eight of these being children reported by the local education authority while at school or liable to attend school, and two were reported on leaving special schools. Of the remaining seven, one (a boy of 17) was referred by the Poole Magistrates' Court, one (a boy of 18) by the Bournemouth Children's Department, one (a young man of 34) was referred by his aged father as beyond his control, one (a girl of 19) by the moral welfare worker as beyond her parents' control and having become pregnant, while the remaining three cases (male, aged 24, females aged 34 and 35) had previously had treatment for mental illness but in each case the fundamental weakness was mental subnormality.

Twelve of these cases were placed under statutory supervision in their own homes, receiving regular visits from the Mental Health Worker, one was placed under guardianship, and four of them were admitted to mental deficiency hospitals.

The position at the end of the year was that 288 cases were on the Authority's Registers, as follows :—

| | *Under age 16* | | *Age 16 and over* | |
|---|---|---|---|---|
| | *Male* | *Female* | *Male* | *Female* |
| Under Statutory Supervision | 19 | 18 | 34 | 47 |
| Under Guardianship ... ... | 3 | 4 | 8 | 11 |
| In "Places of Safety" ... | — | — | — | — |
| In Hospitals ... ... ... | 11 | 9 | 66 | 48 |
| Under Voluntary Supervision | — | — | 4 | 6 |
| TOTAL | 33 | 31 | 112 | 112 |

Six cases were admitted to mental deficiency hospitals during the year, one to Coldeast, two to Field Place, New Milton, and three to Tatchbury Mount, and in a further case a short stay in hospital was arranged to give the parents some relief. Although the hospital position still remains extra-ordinarily difficult, the various medical

superintendents and matrons have been most co-operative in arranging for the admission of the desperately urgent cases. At the end of the year eight cases remained on the urgent waiting list, three low-grade helpless cases and five low-grade ambulant cases, but there have been a number of vacancies found since December, 1956, which has greatly eased the position. Fourteen non-urgent cases also awaited hospital admission at the end of the year, four low-grade, five medium-grade, and five high-grade defectives.

The development of Occupation Centre training in the Borough received a fillip by the opening of a second Centre at Castlemain Avenue during the summer. The younger children and the girls were transferred there, leaving the older boys at Pokesdown, and with an augmented staff a considerably widened range of activity has developed in these Centres. At the end of the year 45 children (24 under 16, 21 over 16) were receiving training in the Centres and a further 10 received training at home. It is estimated that a total of 117 of those on the register would benefit from Occupation Centre or home training, and although this is not a fixed total but varies with the local employment position, the need for the proposed new Occupation Centre at Alma Road seems well established.

## Nursing Homes

At the end of the year, 45 nursing homes in the Borough were registered with the local health authority, a decrease of 2 on the total in 1955. Accommodation was provided for 19 maternity and 552 medical and surgical cases, but the overwhelming majority of patients came within the "chronic sick" category and most of them were elderly persons.

Generally speaking, the standard of nursing homes, as revealed by regular inspection by the Deputy Medical Officer of Health, has remained high, but occasionally there has been cause for concern in the staffing arrangements and general conduct of the nursing homes and action was taken during the year to secure the compulsory closure of one nursing home and the voluntary closure of another. Although the loss of nursing homes in the borough was 2, this was

the net result of a number of closures and a number of new registrations, for the nursing homes of the Borough contain a number whose financial position is precarious. It might be said that there are both too few nursing homes and too many ; too few for the vast number of elderly people who would avail themselves of a reasonably priced alternative to hospital, but too many for those who can afford to pay the high charges necessitated by the cost of everything today.

## Bournemouth Crematorium

Since the opening of Bournemouth Crematorium in 1938, there has been a steady increase in this method of disposing of the dead. The yearly totals are as follows :

| | |
|---|---|
| 1938 | 229 |
| 1939 | 384 |
| 1940 | 514 |
| 1941 | 557 |
| 1942 | 584 |
| 1943 | 693 |
| 1944 | 708 |
| 1945 | 742 |
| 1946 | 834 |
| 1947 | 1026 |
| 1948 | 1012 |
| 1949 | 1155 |
| 1950 | 1306 |
| 1951 | 1484 |
| 1952 | 1472 |
| 1953 | 1681 |
| 1954 | 1770 |
| 1955 | 1991 |
| **1956** | **2142** |

An analysis of the statistics for the year 1956, shows that 51.3 per cent. of applications were received from areas outside Bournemouth, and 48.7 per cent. from within the Borough, and details are given of the wide area served by Bournemouth Crematorium. In all cases the documents were scrutinised by either the Medical Officer of Health or the Deputy Medical Officer of Health, both of whom are approved Medical Referees for this purpose.

## CREMATIONS, 1956

| | |
|---|---|
| County Borough of Bournemouth ... | 1043 |
| Poole ... ... ... ... ... | 408 |
| Christchurch and Ringwood District ... | 166 |
| New Forest and Lymington District ... | 155 |
| Blandford and Wimborne District... ... | 108 |
| Salisbury ... ... ... ... ... | 55 |
| Wareham and Swanage District ... ... | 61 |
| Sturminster and Shaftesbury District ... | 20 |
| Channel Islands ... ... ... ... | 1 |
| Devon ... ... ... ... ... | 3 |
| Hertfordshire ... ... ... ... | 1 |
| Hampshire (apart from surrounding districts) | 22 |
| Yorkshire ... ... ... ... ... | 2 |
| Wales ... ... ... ... ... | 3 |
| Sussex ... ... ... ... ... | 5 |
| Surrey ... ... ... ... ... | 5 |
| Cheshire ... ... ... ... ... | 2 |
| Lincolnshire ... ... ... ... ... | 1 |
| Northampton ... ... ... ... | 2 |
| Lancashire ... ... ... ... ... | 10 |
| Isle of Wight ... ... ... ... | 2 |
| London Area ... ... ... ... | 12 |
| Somerset ... ... ... .. ... | 10 |
| Wiltshire (apart from Salisbury) ... ... | 17 |
| Warwickshire ... ... ... ... | 1 |
| Dorset (apart from Districts given) ... | 15 |
| Berkshire ... ... ... ... ... | 1 |
| Staffordshire ... ... ... ... ... | 2 |
| Essex ... ... ... ... ... | 4 |
| Gloucester ... ... ... ... ... | 1 |
| Kent ... ... ... ... ... | 1 |
| Scotland ... ... ... ... ... | 3 |
| TOTAL | 2,142 |

# National Assistance Act, 1948

**Section 47.** Action was taken in one case during the year, where an old man, Mr. W.H., was found to be living in a home-made shack under very primitive conditions. He was aged about 80 years, and had always lived a gipsy life, and although he had good friends they were no longer able to look after him and had become apprehensive about his future. He was taken on a Magistrate's order to Christchurch Hospital, and making a good recovery, was afterwards transferred to Queen's Close, where he died suddenly some time later from a heart attack.

## NATIONAL ASSISTANCE ACTS, 1948-1951 — INCIDENCE OF BLINDNESS

In Bournemouth, the registration of blind persons and the provision of welfare services for this category of disabled persons is carried out by the Welfare Services Committee, and the following information in respect of new registrations has been supplied by the Chief Officer of Welfare Services :

| | Cause of Disability | | | |
|---|---|---|---|---|
| (i) Number of cases registered during the year in respect of which para. 7(c) of Forms B.D.8 recommends :— | Cataract | Glaucoma | Retrolental Fibroplasia | Others |
| (a) No treatment ... | 14 | 8 | 1 | 17 |
| (b) Treatment (Medical, Surgical or Optical) | 8 | 7 | — | 10 |
| (ii) Number of cases at (i) (b) above which on follow-up action have received treatment | 4 | 1 | — | 5 |

# Public Health Laboratory Service

### Report by Dr. G. J. G. King, Director of the Bournemouth Laboratory

### NUMBER OF SPECIMENS RECEIVED FROM BOURNEMOUTH, 1956

| | |
|---|---|
| Nose and throat swabs ... ... ... ... ... ... ... | 195 |
| Specimens of sputum ... ... ... ... ... ... ... | 6540 |
| Specimens of faeces and urine ... ... ... ... ... ... | 807 |
| Specimens of water ... ... ... ... ... ... ... | 501 |
| Specimens of milk ... ... ... ... ... ... ... | 310 |
| Specimens of ice cream ... ... ... ... ... ... ... | 73 |
| Specimens from miscellaneous sources ... ... ... ... ... | 837 |
| | 9263 |

Specimens were submitted by :

| | *Total Specimens* |
|---|---|
| (a) Royal Victoria Hospital ... ... ... | 191 |
| (b) Sanatoria ... ... ... ... ... | 3,724 |
| (c) Local Practitioners ... ... ... | 449 |
| (d) Public Health Department ... ... | 2,051 |
| (e) The Bournemouth Chest Clinic ... ... | 2,669 |
| (f) Mass Radiography ... ... ... | 179 |
| | 9,263 |

# Water Supply

The water supply to the Borough comes from two sources, the Bournemouth and District Water Company supplying the whole of the Borough with the exception of that part of Southbourne east of Irving Road and Clifton Road, which is supplied by the West Hants Water Company.

Chemical and bacteriological analyses have been carried out at regular intervals at various points in the Borough, and have all proved satisfactory.

# REPORT BY A. J. MORTIMER, METEOROLOGICAL REGISTRAR

## 1956 Summary

The year provides an interesting example of just how misleading figures can be. The summary given below is that of a normal year, sunshine well above average, rainfall slightly so, and a near average mean temperature. In fact, 1956 was a year of weather abnormalities, which cancelled each other out.

First came the severe cold spell of February, with its frozen flood water and skating even on salt water lakes. This was followed by the drought of March, April and May, with its serious heath and forest fires. During the four months ending at the end of May only $3\frac{1}{2}$ inches of rain fell, and May was the driest for sixty years. These months were brilliantly sunny and were largely responsible for the year's good sunshine total.

With June came the commencement of our disappointing summer. July provided only one week of summer temperatures, followed by a disastrous gale on the night of 28th/29th July, accompanied by our lowest barometric reading for July for 34 years (29.02 inches at 10.0 a.m. on the 29th.). From then on, unsettled conditions prevailed, with concentrated thundery rainfalls, September only showing a slight improvement. More settled anticyclonic weather gave us a pleasant October, but these anticyclonic conditions persisting, led to fogs.

### Summary

| | |
|---|---|
| Highest temperature recorded | 78 degrees on 26th July. |
| Lowest temperature recorded | 15 degrees on 2nd and 4th Feb. |
| Greatest fall of rain in one day | 1.97 inches, 19th July. |
| Total rainfall | 32.24 inches (average 31.52 inches) |
| Total sunshine | 1,808.5 hours (average 1,709.9 hours) |
| Number of days with sunshine | 308. |
| Number of days with rain | 151. |
| Mean temperature | 49.0 degrees (average 50.9 degrees) |

## BOURNEMOUTH CLIMATOLOGICAL STATION.

Latitude 50° 44′N. Longitude 1° 53′W. Height above Mean Sea Level, 130 feet.

## TABLES OF TEMPERATURE, SUNSHINE AND RAINFALL

### 1. TEMPERATURE.

| | | Jan. | Feb. | Mar. | April | May | June | July | Aug. | Sept. | Oct. | Nov. | Dec. |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Average ... ... | ... | 41.0 | 41.3 | 44.3 | 48.5 | 53.7 | 59.3 | 62.7 | 62.4 | 58.5 | 52.1 | 45.5 | 41.7 |
| 1956 ... ... | ... | 40.9 | 31.2 | 44.0 | 45.1 | 53.3 | 57.0 | 60.7 | 58.0 | 59.5 | 50.6 | 44.1 | 44.2 |
| Absolute Maximum | ... | 55 | 50 | 59 | 61 | 73 | 72 | 78 | 71 | 72 | 62 | 57 | 55 |
| Date ... ... | ... | 29th | 28/29 | 2/27 | 10th | 23/31 | 11/24 26 | 26th | 8/9 | 13th | 2nd | 9th | 12th |
| Absolute Minimum | ... | 27 | 15 | 28 | 30 | 35 | 41 | 48 | 44 | 45 | 34 | 24 | 25 |
| Date ... ... | ... | 25th | 2/4 | 11/13 | 7/19 20 | 19th | 15th | 11th | 31st | 8th | 27/28 | 22nd | 27th |
| Mean Range ... | ... | 11.9 | 12.3 | 12.1 | 14.3 | 18.4 | 14.0 | 11.8 | 12.7 | 9.5 | 12.3 | 10.8 | 9.1 |
| Humidity % ... | ... | 91.5 | 89.2 | 83.9 | 78.5 | 74.2 | 77.7 | 82.2 | 81.4 | 87.1 | 88.1 | 81.6 | 94.3 |

Mean temperature for 1956 - 49.0. Average (Air Ministry) - 50.9.

## 2. SUNSHINE (Hours).

| | Jan. | Feb. | Mar. | April | May | June | July | Aug. | Sept. | Oct. | Nov. | Dec. |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Average ... ... ... | 62.3 | 79.2 | 137.3 | 175.5 | 213.6 | 229.8 | 210.8 | 203.1 | 151.8 | 115.3 | 71.7 | 59.5 |
| 1956 ... ... ... | 70.8 | 108.2 | 173.8 | 200.2 | 268.2 | 181.1 | 202.8 | 223.6 | 116.4 | 143.7 | 96.7 | 23.0 |
| Average per day (1956) | 2.3 | 3.7 | 5.6 | 6.7 | 8.7 | 6.0 | 6.5 | 7.2 | 3.9 | 4.6 | 3.2 | 0.7 |
| Highest amount in one day | 7.2 | 9.2 | 11.3 | 12.8 | 14.4 | 15.1 | 15.0 | 13.4 | 10.5 | 9.6 | 7.7 | 6.1 |
| Date ... ... ... | 15th | 25th | 26th | 21st | 15th | 26th | 25th | 8/14 | 2nd | 11th | 1st | 26th |
| Days with Sunshine ... | 21 | 23 | 30 | 27 | 31 | 29 | 29 | 30 | 27 | 26 | 24 | 11 |

Total for 1956 - 1808.5. Average (Air Ministry) - 1709.9.

## 3. RAINFALL (Inches).

| | Jan. | Feb. | Mar. | April | May | June | July | Aug. | Sept. | Oct. | Nov. | Dec. |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Average ... ... | 2.70 | 2.39 | 2.33 | 1.79 | 1.76 | 2.01 | 2.13 | 2.52 | 2.34 | 4.27 | 3.40 | 3.88 |
| 1956 ... ... ... | 5.04 | 0.04 | 0.98 | 2.03 | 0.42 | 2.71 | 4.36 | 2.88 | 5.33 | 2.06 | 0.86 | 5.53 |
| Daily Average ... ... | 0.16 | .0014 | 0.03 | 0.07 | 0.01 | 0.09 | 0.14 | 0.09 | 0.18 | 0.07 | 0.03 | 0.18 |
| Greatest fall in one day | 1.33 | 0.02 | 0.35 | 0.62 | 0.25 | 0.57 | 1.97 | 0.51 | 1.12 | 0.83 | 0.31 | 0.99 |
| Date ... ... ... | 30th | 12th | 22nd | 12th | 9th | 3rd | 19th | 1st | 27th | 8th | 8th | 27th |
| No. of days with rain ... | 20 | 3 | 7 | 10 | 7 | 12 | 15 | 22 | 12 | 11 | 12 | 20 |

Total Rain 1956 - 32.24. Average (Air Ministry) - 31.52.

# SANITARY CIRCUMSTANCES, HOUSING AND INSPECTION OF FOOD

**Report by William Riley, F.R.S.H., Chief Public Health Inspector**

## 1. Housing

(HOUSING ACTS, 1936 to 1954 AND PUBLIC HEALTH ACT, 1936)

### (a) Repair.

| | |
|---|---|
| Number of houses inspected for housing defects ... ... ... | 379 |
| Number of visits made for the above purpose ... ... ... | 1,207 |
| Houses found not in all respects reasonably fit for human habitation ... ... ... ... ... ... ... ... | 234 |
| Defective houses made fit following informal action ... ... | 193 |

Houses in which defects were remedied after service of formal notices under the Public Health Act, 1936:—

| | |
|---|---|
| (a) by owners ... ... ... ... ... ... ... ... | 28 |
| (b) by local authority in default of an owner ... ... ... | 1 |

Houses made fit after service of formal notices under the Housing Act, 1936 :—

| | |
|---|---|
| (a) by owner ... ... ... ... ... ... ... ... | 1 |
| (b) by local authority in default of owners ... ... ... | Nil |

### (b) Demolition and Closures (*Housing Act*, 1936).

| | | |
|---|---|---|
| (i) | Houses demolished following formal action under Section 11 | 2 |
| (ii) | Houses closed in pursuance of an undertaking given by owner under Section 11 and still in force ... ... ... ... | Nil |
| (iii) | Parts of building closed (Section 12) ... ... ... ... | Nil |

**Housing Repairs and Rents Act, 1954.**

| | |
|---|---|
| Inspections made re applications for Certificates of Disrepair and the revocation thereof ... ... ... ... ... ... | 51 |

### (c) Overcrowding (*Housing Act*, 1936—*Part IV*).

| | |
|---|---|
| Number of houses inspected re alleged overcrowding ... ... | 91 |
| Number of houses found to be overcrowded ... ... ... | 26 |
| Number of cases of overcrowding abated ... ... ... ... | 5 |
| Number of houses visited to ascertain "permitted number" ... | 75 |
| Number of rooms measured to ascertain "permitted number" ... | 290 |

## (d) Applications for Corporation Houses.

In 59 cases, applicants' houses were visited when any overcrowded or other unsatisfactory conditions were noted for subsequent action.

## (e) Movable Dwellings (*Public Health Act*, 1936, *Sections* 268 *and* 269).

The movable dwellings stationed in Bournemouth consist of caravans, many of which are used by holiday-makers. The occupiers of others contend that they are unable to buy and furnish a house and prefer caravan life rather than live in rooms. One is forced to the conclusion, however, that the restricted space of a caravan, especially during the winter months, makes this type of dwelling unsuitable as a permanent home and particularly so for adolescents and young children.

During the year 1956, the position as regards caravans in Bournemouth was as follows :—

| | |
|---|---|
| *Number of applications for licences to station and use caravans as dwellings ... ... ... ... ... ... ... ... | 31 |
| Number granted ... ... ... ... ... ... ... | 31 |
| Number of licensed sites for caravans ... ... ... ... | 12 |
| Number of applications for extensions or variations of site licences | 2 |
| Number granted ... ... ... ... ... ... ... | 2 |
| At 31st December, 1956, the total number of caravans licensed to be used as dwellings in the Borough was ... ... ... | 560 |
| Number of visits to caravan sites during year ... ... ... | 133 |

* It should be noted, however, that an applicant must also obtain the consent of the Town and Country Planning Authority in addition to a licence under the Public Health Act, 1936. Thus, health and amenities are safeguarded.

Generally, the licensees have observed the conditions imposed by the local authority when the licences were granted.

## (f) Land Charges Enquiries.

The number of enquiries dealt with regarding various properties was 3,489.

# II. Inspection of Food and Food Premises

The Food Hygiene Regulations, 1955, came into operation during 1956 in two stages viz :—on 1st January and 1st July. They affect at least two thousand premises in this Borough, all of which are subject to inspection. In view of their importance in Bournemouth where catering is the main industry, information on the Regulations was given in the local press and your Chief and Deputy Chief Public Health Inspectors gave explanatory addresses at well-attended meetings of local hoteliers, boarding-house keepers, grocers, bakers and confectioners.

During the months of July, August and September, the permanent staff was augmented by two temporary full-time Public Health Inspectors who assisted in the inspection of various food premises. This experiment was fully justified and proved very successful.

The following table shows the magnitude and importance of this duty.

| *Type of Premises* | *No. in Borough* | *No. of visits made* |
|---|---|---|
| Bakehouses | 59 | 176 |
| Cafés and Restaurants | 184 | 581 |
| Confectioners' and Pastrycooks' shops | 195 | 192 |
| Cooked meat shops | 15 | 182 |
| Fishmongers' and Poulterers' shops | 58 | 186 |
| Fried Fish Shops | 31 | 74 |
| Greengrocers' shops | 173 | 249 |
| Grocers' shops | 338 | 860 |
| Gut-scraping works | 1 | 7 |
| Hotel and Boarding house kitchens | 935 | 1460 |
| School Feeding Centres | 27 | 41 |

Many food premises were improved following inspections, during the course of which your Inspectors also called attention to contraventions of the Regulations when necessary.

Particulars of other duties under the above heading are as follows :—

## (a) Meat Inspection.

There is only one slaughterhouse in Bournemouth ; this is a small one, licensed and privately-owned, where pigs are slaughtered infrequently.

Meat is brought into the Borough from slaughterhouses in other districts, the largest of these being at Uddens in the Wimborne and Cranborne Rural District where there are facilities, including inspection, to cover the requirements of a population of 350,000 persons.

The 114 butchers' shops and 6 wholesale meat stores in Bournemouth were visited 528 times during the year to ensure that meat and offals for sale were wholesome. The introduction throughout the country of a compulsory system of marking home-killed meat which has been inspected and passed officially as fit for human consumption would be a valuable safeguard and is worthy of serious consideration.

## (b) **Milk Supplies.**

All retail sales of milk in Bournemouth during 1956 were of the following designations in compliance with the Milk (Special Designations) (Specified Areas) Order, 1952 :—

(i) "Pasteurised" and "Tuberculin Tested" (Pasteurised). Bottled supplies of these were from four licensed premises in Bournemouth and from one in Poole.

(ii) A small quantity of "Tuberculin Tested" milk produced at a farm out of the Borough for consumption at a local café.

and (iii) A small quantity of milk sterilised and bottled at licensed premises in another town.

There are a few dairy farms in the outlying districts of Bournemouth where the supervision of milk production is the responsibility of the Ministry of Agriculture, Fisheries and Food.

Details of your Public Health Inspectors' supervisory duties with regard to the supply of milk in the Borough are given below :—

### (i) THE MILK AND DAIRIES REGULATIONS, 1949.

| | *Number* | *Inspections* |
|---|---|---|
| Dairies ... ... ... ... ... ... | 4 | 166 |
| Milkshops ... ... ... ... ... ... | 167 | 192 |
| Pasteurising Plants ... ... ... ... | 4 | 121 |

Consumers of bottled milk should ensure that all milk bottles are rinsed out with clean water prior to collection by the roundsmen. Complaints of the misuse of milk bottles have again been investigated.

## (ii) THE MILK (SPECIAL DESIGNATION) (PASTEURISED AND STERILISED MILK) REGULATIONS, 1949-1953
and
## THE MILK (SPECIAL DESIGNATION) (RAW MILK) REGULATIONS, 1949-1954

The undermentioned licences were in operation during 1956 :—

*"Tuberculin Tested" Milk.*

| | |
|---|---|
| Bottlers' Licences ... ... ... | 4 |
| Dealers' Licences ... ... ... | 84 |

*"Pasteurised" Milk.*

| | |
|---|---|
| Dealers' (Pasteurisers') Licences ... | 4 |
| Dealers' Licences ... ... ... | 167 |

*"Sterilised" Milk.*

| | |
|---|---|
| Dealers' Licences ... ... ... | 2 |

200 samples of "Pasteurised" Milk, 74 of "Tuberculin Tested" (Pasteurised) Milk and one of "Sterilised" Milk were submitted to the Public Health Laboratory for examination. It is gratifying to record that all these complied with the prescribed standards.

## (c) Ice Cream.

### THE FOOD AND DRUGS ACT, 1955, SECTION 16.
### THE ICE-CREAM (HEAT TREATMENT, etc.) REGULATIONS, 1947-1952

| *Number of premises registered during* 1956 | | *Total number premises on register* | *Number of visits to premises during* 1956 |
|---|---|---|---|
| For manufacture | Nil | 3* | 71 |
| For storage and sale | 22 | 474 | 258 |

* Hot Mix (Method II) used at two premises and Cold Mix at one.

Your Public Health Inspectors obtained 73 samples of ice cream for testing for bacterial cleanliness. These were graded as follows after application of the Methylene Blue Test at the Public Health Laboratory :—

| *Number of Samples* | *Provisional Grade** | |
|---|---|---|
| 58 | I | |
| 13 | II | |
| 1 | III | Repeat samples |
| 1 | IV | were satisfactory |

* (Grades I and II are satisfactory ; but where a series of samples from the same supply fall within Grades III and IV, the bacteriological cleanliness of the ice-cream is regarded as unsatisfactory).

5 samples of ice cream were found to conform to the prescribed compositional standard when examined by the Public Analyst.

(d) **Ice Lollies.**

34 out of a total of 48 samples submitted to the Public Health Laboratory for bacteriological examination were found to be satisfactory. The remaining 14 were from a local factory, the proprietors of which discontinued manufacture following investigations.

9 samples of ice lollies were also obtained for chemical analysis. 8 were certified as satisfactory ; but one contained 7.9 p.p.m. excess copper. Appropriate action was taken with satisfactory results.

(e) **Prepared Foods** (*Food and Drugs Act*, 1955, *Section* 16).

82 premises in the Borough were registered for the manufacture of fish or meat products. 96 visits were paid to these, when it was noted that satisfactory standards of hygiene were being maintained.

(f) **Foodstuffs condemned.**

During the year 1956, a total of 15 tons, 6 cwts., 2 qrs., 7½ lbs. of food stuffs were condemned as unfit for human food after examination by your Public Health Inspectors. This amount was 11.8 per cent. less than in the previous year.

Details are as follows :—

| *Description* | *Tons* | *Cwts.* | *Qrs.* | *Lbs.* |
|---|---|---|---|---|
| Fish ... ... ... | 1 | 9 | 0 | ¾ |
| Meat ... ... | 1 | 9 | 0 | 18½ |
| Canned foods ... | 7 | 8 | 3 | 20 |
| Other foodstuffs ... | 4 | 19 | 1 | 24¼ |

After observance of the necessary safeguards, including sterilisation, condemned food was allowed to be used for feeding to animals and a private firm collected diseased and unsound meat for manufacture in another town into fertilisers and industrial fats.

(g) **Sampling of Food and Drugs.**

Your Public Health Inspectors who also act as Sampling Officers under the Food and Drugs Act, 1955, obtained 135 formal

and 293 informal samples for examination by the Public Analyst who reported adversely on 36 of these. Details are set out in the following statement :—

## Formal Samples

| *Reference No.* | *Sample* | *Nature of Adulteration* | *Action taken, etc.* |
|---|---|---|---|
| 530 | Bread and Butter | 83% margarine, 17% butter. | Vendor prosecuted and fined £5 with £2 2s. 0d. costs. |
| 535 | Bread and butter | 86.2% margarine, 13.8% butter. | Warning letter sent to Vendor. |
| 536 | Cold Milk ... | 7.7% fat deficient. | ditto. |
| 539 | Cold Milk ... | 17% fat deficient. | ditto. |
| 257 | Milk ... ... | 2.2% deficient in solids not fat. | Genuine, but an irregular milk. |
| 258 | Milk ... ... | 2.4% deficient in solids not fat. | ditto. |
| 261 | Milk ... ... | 1.4% deficient in solids not fat. | ditto. |
| 263 | Milk ... ... | 2.4% deficient in solids not fat. | ditto. |
| 264 | Milk ... ... | 0.5% deficient in solids not fat. | ditto. |
| 266 | Milk ... ... | 2.7% deficient in solids not fat. | ditto. |
| 260 | Milk ... ... | 7.7% deficient in fat and 4.2% deficient in solids not fat. | |
| 262 | Milk ... ... | 8.3% deficient in fat and 4.2% deficient in solids not fat. | Vendor prosecuted ; but proceedings failed on a technicality. |
| 265 | Milk ... ... | 10% deficient in fat and 3.1% deficient in solids not fat. | |
| 268 | Milk ... ... | 3.3% deficient in fat and solids not fat low. | Warning letter sent to Vendor. |
| 269 | Milk ... ... | Irregular. Solids not fat low, but freezing point -0.552°C. | — |
| 277 | Pork Sausages ... | Deficient in meat by 22%. | Warning letter sent to Vendor. |
| 283 | Pork Sausages ... | Deficient in meat by 27.7%. | Proceedings not taken owing to lack of legal standard. |
| 1058 | Shredded Suet ... | 5.3% deficient in Beef. | Proceedings not taken owing to a sampling irregularity. |

## Informal Samples

| | | | |
|---|---|---|---|
| E.29 | Cream Horn ... | Contained synthetic cream. | Vendor warned. |
| E.31 | Cream Slice ... | Contained synthetic cream. | ditto. |

| *Reference No.* | *Sample* | *Nature of Adulteration* | *Action taken, etc.* |
|---|---|---|---|
| G.1 | Iced Lollie ... | 7.9 p.p.m. excess of copper. | Warning letter sent to Manufacturer. |
| E.13 | Milk ... ... | 3.3% deficient in milk fat. | Matter taken up by the Town Clerk with the Milk Marketing Board. |
| E.15 | Milk ... ... | 1.7% deficient in milk fat. | |
| E.21 | Milk ... ... | Irregular — solids not fat low, but freezing point –O.537°C. | |
| E.22 | Milk ... ... | 10% deficient in fat. Solids not fat low, but freezing point –0.537°C. | |
| E.23 | Milk ... ... | 17% fat deficient. | |
| F.27 | Milk ... ... | 20% fat deficient. | |
| F.17 | Milk ... ... | Presence of traces of hypochlorites. | Dairy warned. |
| E.1 | Milk ... ... | 1.2% deficient in solids not fat. | Genuine, but irregular milk. |
| A.105 | Milk, Channel Islands ... | 86% deficient in milk fat. | Followed by a formal sample which was found to be genuine. |
| C.25 | Pork Sausages ... | Deficient in meat by 5.1%. | Followed by formal sample. |
| C.27 | Pork Sausages ... | Deficient in meat by 14.8%. | ditto. |
| A.93 | Shelled Almonds | Unfit for human consumption. | Remainder of stock surrendered. |
| J.39 | Shredded Suet ... | 15.6% deficient in beef. | Followed by formal sample. |
| F.43 | Sweet Pickle ... | 140 p.p.m. excess of lead. | Makers informed. Further samples found to be satisfactory. |
| D.17 | Whitfield's Ointment ... | Deficient in benzoic acid by 5.29% and salicylic acid by 0.80 parts per 100 parts of ointment. | Followed by formal sample. |

# III. General Sanitation, Inspection of Shops and Factories and Miscellaneous Duties

## (a) **Nuisances.**

| | |
|---|---|
| Complaints received and investigated ... ... ... ... ... | 1058 |
| Statutory Nuisances found ... ... ... ... ... ... | 700 |
| Statutory Nuisances abated ... ... ... ... ... ... | 678 |
| Total number of visits re above ... ... ... ... ... ... | 4387 |

## (b) Drainage Work.

| | |
|---|---|
| Visits to buildings in course of construction ... ... ... ... | 3554 |
| Tests applied to drainage at the above ... ... ... ... ... | 3061 |
| Defects found and remedied ... ... ... ... ... ... | 429 |
| Visits to existing buildings re drainage ... ... ... ... ... | 618 |
| Tests applied to drainage at the above ... ... ... ... ... | 285 |
| Defects found and remedied ... ... ... ... ... ... | 123 |
| Cesspools built ... ... ... ... ... ... ... ... | 2 |
| Cesspools abolished and drains connected to sewer ... ... ... | 5 |
| *Private sanitary surveys made for prospective purchasers of property | 27 |

(Total amount received in fees was £88 13s. 6d.)

* These surveys are made on payment of a fee to the Corporation, the scale of charges being as follows :—

| | £ | s. | d. |
|---|---|---|---|
| Rateable value of the property under £50 ... ... ... | 2 | 12 | 6 |
| Rateable value of the property over £50 but under £250 ... | 3 | 13 | 6 |
| Rateable value of the property £250 or over ... ... ... | 6 | 6 | 0 |

## (c) Refuse Accommodation.

| | |
|---|---|
| Number of dustbins provided following service of notices ... ... | 90 |

## (d) Disinfestation.

| | |
|---|---|
| Number of premises treated with insecticides .. ... ... ... | 45 |
| Number of articles disinfested ... ... ... ... ... ... | 69 |
| Number of wasps' nests destroyed ... ... ... ... .. | 233 |
| Number of inspections of verminous premises ... .. ... ... | 81 |

## (e) Infectious Diseases and Disinfection.

| | |
|---|---|
| Visits in connection with enquiries ... ... . ... ... | 653 |
| Number of rooms treated with disinfectant :— | |
| (a) After notifiable disease ... ... ... ... ... ... | 43 |
| (b) After non-notifiable disease ... ... ... ... ... | 45 |
| (c) After tuberculosis ... ... ... ... ... ... | 30 |
| Number of articles treated with disinfectant ... ... ... ... | 594 |

## (f) Shops Act, 1950.

253 inspections were made, in the course of which 34 contraventions were found and dealt with informally.

During the year 1956, three Orders were made by the Town Council under the above-named Act, particulars of these being as follows :—

(1) An Order permitting newsagents' shops to open from 8 a.m. until 1 p.m. on each Sunday between 20th May and 16th September, 1956, for the sale of—

(i) articles required for bathing or fishing ;

(ii) toys, souvenirs and fancy goods ;

(iii) books, stationery, photographs, reproductions and post-cards.

(2) An Order exempting shops where the retail trade or business of the sale of motor vehicles (including motor cycles) is carried on, from the early closing requirements of the Shops Act, 1950.

(3) An Order suspending the Bournemouth Weekly Half-Holiday Order (Fish Friers) 1943, during the period 21st May, 1956, to 10th September, 1956, both dates inclusive.

(g) **Inspection of Factories** (*Factories Act*, 1937).

| *Premises* | *Number on Register* | *Number of* | | |
|---|---|---|---|---|
| | | *Inspections* | *Written notices* | *Occupiers Prosecuted* |
| (i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by the Local Authority | 172 | 69 | 3 | — |
| (ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority | 606 | 260 | 19 | — |
| (iii) Other premises in which Section 7 is enforced by the Local Authority | — | — | — | — |
| TOTALS | 778 | 329 | 22 | — |

## IMPROVEMENTS EFFECTED AT FACTORIES

| *Particulars* | *Number of cases where defects were found* | | | | |
|---|---|---|---|---|---|
| | *Found* | *Remedied* | *Referred* | | *Number of prosecutions* |
| | | | *To H.M. Inspctr.* | *By H.M. Inspctr.* | |
| Want of cleanliness (S.1) | 9 | 7 | — | 5 | — |
| Overcrowding (S.2.) ... | — | — | — | — | — |
| Unreasonable temperature (S.3.) ... | 5 | 1 | — | — | — |
| Inadequate ventilation (S.4.) ... | — | — | — | — | — |
| Ineffective drainage of floors (S.6.) ... | — | — | — | — | — |
| Sanitary Conveniences (S.7) | | | | | |
| (a) Insufficient ... | 2 | 2 | — | 2 | — |
| (b) Unsuitable or defective | 20 | 12 | — | 10 | — |
| (c) Not separate for sexes | 1 | 1 | — | 1 | — |
| Other offences against the Act (not including offences re Outworkers) ... | 18 | — | 18 | — | — |
| TOTALS | 55 | 23 | 18 | 18 | — |

## OUTWORK

**(Sections 110 and 111, Factories Act, 1937)**

| *Nature of Work* | *Section 110* | | | *Section 111* | | *Prosecutions* |
|---|---|---|---|---|---|---|
| | *No. of outworkers in August list required by Section 110 (1) (c)* | *No. of cases of default in sending lists to the Council* | *No. of prosecutions for failure to supply lists* | *No. of instances of work in unwholesome premises* | *Notices served* | |
| Wearing apparel (Making etc.) | 8 | — | — | — | — | — |
| Curtains & furniture hangings | 7 | — | — | — | — | — |
| TOTALS | 15 | — | — | — | — | — |

## (h) Young Persons (Employment) Act, 1938.

Four contraventions were found and rectified after informal action had been taken.

## (i) Rodent Control.

A perusal of the following table will convey some idea of the amount of work involved in this duty.

| | |
|---|---|
| Complaints received and investigated | 1294 |
| Dwelling-houses and adjoining land surveyed | 1661 |
| Dwelling-houses and adjoining land treated | 1237 |
| Business premises surveyed | 131 |
| Business premises treated | 41 |
| Plots of land surveyed | 53 |
| Plots of land treated | 51 |
| * Dead rats recovered after baiting | 1483 |

(* It is reasonable to assume that many other rats died under cover.)

The Local Authority continued to provide reasonable assistance, free of charge, in the extermination of rats and mice at domestic premises where the owners or occupiers co-operated. Although this arrangement has its advantages, owners or occupiers of infested land or premises should note that this duty is primarily their responsibility as prescribed by the Prevention of Damage by Pests Act, 1949. Charges were made however, in the case of infested business premises.

As stated in previous reports, much more could be done by the general public in preventing conditions which are conducive to rodent infestations. Here is a simple way of reducing municipal expenditure.

Officials of the Infestation Division of the Ministry of Agriculture, Fisheries and Food were very helpful during the year.

## (j) Fertilisers and Feeding Stuffs Act, 1926.

11 informal and 17 formal samples were submitted to the Agricultural Analyst who reported a few cases where the composition of samples varied slightly when compared with the declared values of the components. Appropriate action was taken.

(k) **Merchandise Marks Act, 1926, and Agricultural Produce (Grading and Marking) Act, 1928.**

No offences were discovered.

(l) **Pharmacy and Poisons Act, 1933 (Part II).**

At the end of the year there were 243 shop-keepers, other than registered pharmacists, who were licensed by the local authority to sell poisons named in Part II of the Poisons List (e.g., disinfectants, ammonia, weed-killers, hair-dyes, etc.).

298 visits were made to ascertain whether the provisions of the Act were being observed ; but only 7 minor contraventions were found and these were remedied promptly.

(m) **Rag Flock and Other Filling Materials Act, 1951.**

This Act requires the use of clean filling materials in upholstered articles and other goods which are stuffed or lined and for purposes connected therewith.

On 31st December, 1956, there were fourteen upholsterers' premises registered under the Act and annual licences were granted for the storage of rag flock at three premises.

Four samples of filling materials were submitted to the analyst who certified them as satisfactory.

(n) **Pet Animals Act, 1951.**

Annual licences were granted to seventeen persons to keep pet shops ; but one application for a licence to keep birds in a large general store was refused.

(o) **Places of Entertainment.**

72 inspections of theatres, cinemas and other places of entertainment were made to ascertain the state of cleanliness, the condition of the sanitary accommodation and the efficiency of the

ventilation systems. Prompt action was taken by the managers in the few cases where defects were noted.

## (p) Atmospheric Pollution.

One of Bournemouth's priceless assets is its clear atmosphere, generally taken for granted by residents, but envied by visitors from industrial parts of the country. Nevertheless, some atmospheric pollution arises from the burning of smoke-producing fuel in improperly-designed fireplaces, and in its use at a few industrial premises in the Borough.

Nuisances from the discharge of smuts from two oil-burning plants were dealt with during the year.

In December, certain provisions of the Clean Air Act, 1956, came into operation.

## (q) Swimming Baths and Paddling Pool.

In the Borough are three swimming baths which are open to the general public and a paddling pool for the use of children during the holiday season. The water in all of these has been sampled frequently for bacteriological and chemical examination.

## (r) Public Conveniences.

During 1956 the Superintendent and his assistant collected a total of £13,284 5s. 1d. from the 180 public conveniences in Bournemouth. This amount is made up as follows :—

| | £ | s. | d. |
|---|---|---|---|
| From coin locks ... ... ... ... ... | 12,553 | 13 | 1 |
| From wash and brush-up rooms ... ... ... | 657 | 17 | 11 |
| From paper towel dispensers ... ... ... ... | 72 | 14 | 1 |

Free washing facilities were available at 18 public conveniences.

A new public convenience for ladies was provided at Bear Cross, Kinson, in 1956.

52 coin locks, a water-closet cistern and pan, and a urinal were wilfully damaged during the year.

## (s) Legal Proceedings.

The following legal proceedings were taken during the year.

| *Proceedings taken under* | *For* | *Result* |
|---|---|---|
| Public Health Act, 1936 | Non-compliance with an Abatement Notice to carry out repairs. | Court Order to carry out the required work in 28 days. |
| Food Hygiene Regulations, 1955 | Having dirty food rooms and equipment in a hotel, the condition of which exposed food to the risk of contamination. | Defendant Company fined £60 with £12 12s. 0d. costs. |
| Public Health Act, 1936 | Non-compliance with an Abatement Notice to carry out repairs. | Defendant landlords fined £5 and costs and ordered to abate the nuisance within 28 days. |
| Food and Drugs Act, 1955 | Selling to the prejudice of the purchaser bread, spread with a mixture of butter and margarine, instead of butter. | Vendor fined £5 with £2 2s. 0d. costs. |
| Food Hygiene Regulations, 1955 | Having a food shop and equipment in a dirty condition and not taking reasonable steps to protect food from contamination. | Defendant fined £15. |
| Food and Drugs Act, 1955 | Selling milk deficient in fat to the prejudice of the purchaser. | Case dismissed. |

### WORK EXECUTED BY LOCAL AUTHORITY ON FAILURE OF OWNER OF PROPERTY TO COMPLY WITH STATUTORY NOTICE

| *Notice served under* | *Work executed* | *Costs involved which were recovered* |
|---|---|---|
| Public Health Act, 1936, Section 39 | Defective underground drains repaired. | £22 6s. 11d. |

# Report of the Public Analyst

Arthur S. Carlos, B.Sc., (Lond.), F.R.I.C.

For the Year ended the 31st December, 1956

**Food and Drugs.**

A new Food and Drugs Act came into force at the beginning of the year, and the total number of samples submitted to me by your Inspectors under this Act was 428, comprising 135 Formal Samples and 293 Informal.

The total number of samples found to be adulterated or irregular was 18 Formal and 18 Informal. This represents a percentage adulteration of 8.7, which is an increase on the previous year.

The incidence of adulteration in the County Borough during the past five years is as follows :—

| | 1952 | 1953 | 1954 | 1955 | 1956 |
|---|---|---|---|---|---|
| No. of Samples taken ... ... | 540 | 370 | 518 | 482 | 428 |
| No. of Samples adulterated ... | 23 | 40 | 46 | 26 | 36 |
| Percentage adulteration ... | 4.2 | 10.8 | 8.9 | 5.4 | 8.7 |

These figures show that there has been a considerable rise in the number of adulterated or irregular samples since the previous year.

Full details of the formal and informal samples taken are given in Tables I and II, and Tables III and IV give particulars of all the irregular and adulterated samples.

**Milk.**

A total of 62 samples of Milk was taken under the Sale of Milk Regulations, 1939. 47 of these samples were submitted as Milk, and of these, 18 were found to be adulterated or irregular, failing to comply with the legal limit of a minimum of 3 per cent. fat and 8.5 per cent. solids not fat. This represents a percentage adulteration of 38.3, being a great increase over last year's samples, as shown by the following table :—

| | 1953 | 1954 | 1955 | 1956 |
|---|---|---|---|---|
| Samples of Milk taken ... ... | 92 | 92 | 42 | 47 |
| Percentage adulteration ... | 11.9 | 12.0 | 4.7 | 38.3 |

The analysis of the adulterated samples shows that four were deficient in Fat, nine deficient in Solids not Fat, and five deficient in both Fat and Solids not Fat. Four of these samples showed a freezing point of over -0.535 degrees Centigrade and were therefore genuine milks, as from the cow, but irregular in that they did not comply with the legal minimum limits.

The remaining 15 samples were of Channel Islands Milk, and of these, only one contained less than the required minimum standard of 4 per cent.

| | 1953 | 1954 | 1955 | 1956 |
|---|---|---|---|---|
| Samples of Channel Islands Milk taken ... ... ... | 35 | 26 | 17 | 15 |
| Percentage adulteration ... | 5.7 | 11.5 | 11.7 | 6.7 |

The adulterated sample contained only 0.56 per cent. of fat, representing a deficiency of 86 per cent.

Details of the average analyses of all samples of milk are given in Tables V and VI. The figures show that the average quality of the samples taken was poorer, both in solids not fat and fat than the average given in last year's report. This is due to the high percentage of adulterated samples which is included in the total.

Two samples of Milk were examined for the presence of Hypochlorites or Chlorates, and a trace of these was found in one sample.

No samples of Hot Milk as sold in Cafes and restaurants were taken, but four samples of Cold Milk were submitted, two of which were deficient in fat.

**Butter and Margarine.** Five samples of Butter and three of Margarine were submitted for examination and all found to be genuine. The three samples of Margarine all contained over 10 per cent. of Butter, which agreed with the declaration.

**Lard and Fats.** Six samples of Lard were found to be free from any adulterant, also one sample of Cooking Fat and two of Frying Oil were found to be genuine and of good quality.

**Buttered Goods.** Fourteen Samples of Bread and Butter or Toast and Butter were examined, and of these, twelve had been prepared

with genuine Butter and the remaining two from a mixture of Butter and Margarine.

**Ice Cream.** Five samples of Ice Cream were examined and showed an average content of 9.6 per cent. of Fat and 15.8 per cent. of Sugar. These figures are well over the legal limits of 5 and 7.5 per cent., respectively.

**Sausages.** Eighteen samples of various kinds of sausages were submitted for analysis. During 1956 a report was published by the Food Standards Committee of the Ministry of Agriculture, Fisheries and Food, recommending a minimum standard of 65 per cent. meat in Pork Sausages and 50 per cent. meat in Beef and all other meat sausages. This recommendation has not yet been issued as a Statutory Instrument, but the standard has been adopted by all Public Analysts.

Four of the samples submitted failed to comply with these standards and were from 5.1 to 27.7 per cent. deficient in meat as shown in Tables III and IV.

**Other Meat Products.** Five samples of various kinds of Meat Pie were examined and all found to be of good quality and to contain a good proportion of meat. One sample of Meat Paste and one of Minced Chicken were also examined and found to be satisfactory.

**Jam.** Three samples of Strawberry Jam were examined and found to have a good fruit content and to be free from foreign matter.

**Sugar Confectionery.** Three samples of Butter Sweets were examined and all contained over the statutory amount of at least 4 per cent. of Butter.

Four samples of Sherbet and one of Sherbet Sweets were submitted for analysis and all found to be of satisfactory composition and free from metallic contamination.

Three other types of sweets, including two of Cough Drops, were examined and found to be satisfactory.

**Dried Fruits, etc.** Three samples of Dried Prunes were found to be satisfactory and free from treatment with silicate of soda, which

is sometimes used to "rejuvenate" prunes and make them look bright. The remaining samples, all of which were satisfactory, consisted of three samples of Glacé Cherries, two Angelica, four Candied Peel and two Crystallized Ginger.

**Cakes.** Two samples of Cream Cakes were examined and both found to contain a synthetic cream manufactured from sugar and margarine, whereas when the designation "Cream" is used, the filling should have been prepared from milk rich in fat. Two other samples, consisting of one Doughnut and one Cherry Cake were found to be genuine.

**Cake and Pudding Mixtures.** Six samples of pre-packed mixtures containing the ingredients for making cakes or puddings were examined. All were found to be satisfactory and free from foreign matter or adulterants.

**Custard Powder.** Seven samples of various makes of Custard Powder were examined. These were found to be satisfactory and free from injurious colour, infestation or foreign matter.

**Pickles and Chutney.** Seven samples were examined and found to be satisfactory and free from excessive metallic contamination with the exception of one sample of sweet pickles which contained an excess of 140 p.p.m. of lead. This high figure could have been produced by a small piece of lead, such as lead shot, having been embedded in a portion of cabbage.

**Wines and Spirits.** Six samples of various wines consisting of Green Ginger and Port Wine were found to be genuine. In the case of the Port Wines the analyses showed that they were not "Port Type" wines.

The nine samples of Spirits all showed, on analysis, a good percentage of Proof Spirit.

**Tinned Foods.** A considerable number of tins of food were examined including, Beans, Fish, Vegetables, Fruit, Rhubarb and a Steak and Kidney Pie. In all cases the limits of such metals as lead, tin and copper were found to be lower than the limits recommended by the Food Standards Committee of the Ministry. Metallic contamination

in food is of great importance as excess of tin can lead to symptoms of food poisoning.

**Dirt and Foreign Matter in Foods.** All samples submitted under the Food and Drugs Act were specially examined for the presence of dirt or foreign matter, and only in one case, a packet of Shelled Almonds, was any appreciable dirt found.

**Chewing Gum.** This commodity is now included under the Food and Drugs Act. Four samples, including two Bubble Gums, were examined and found to be satisfactory.

**Drugs.** Sixty-seven samples of Drugs were examined and are listed in Tables I and II. All were found to be of satisfactory composition and to agree with the tests laid down, except for a sample of Whitfield's Ointment which was deficient in some ingredients.

**Special Samples.** Twenty-nine samples were submitted for special examination and are listed in Table VII. Twenty were of various kinds of food, twelve of which were fit for human consumption, the remainder being rejected for various reasons as shown in the Table.

The remaining samples were very varied and included smuts from the roof of a car, soluble oil emulsion put in place of a school milk, and ditch and stream waters.

**Water Supply.** The regular samples of both the main sources of water supply in the Borough have been taken each month and the results show that the good quality of the water has been maintained.

**Fertilisers and Feeding Stuffs Act, 1926.** Nineteen Fertilisers and nine Feeding Stuffs of various kinds were examined under the Act. Eight of the Fertilisers and two of the Feeding Stuffs did not correspond with the Statutory Statements which have to be supplied under the Act.

**Sewage Disposal.** Regular samples have been taken from the Kinson Sewage Works and these have shown a very marked improvement on previous years. The trouble regarding the presence of copper in the sewage and reported upon in my last Annual Report has been completely overcome.

**Swimming Bath Waters.** Regular samples from all the public swimming baths in the Borough have been examined and a check kept upon the quality of the water and the degree of chlorination. In general the condition of all these bath waters is quite satisfactory.

**Stream Water.** Monthly samples of the Bourne Stream water have been taken at the Borough Boundary and at the Lower Pleasure Gardens. The results again show that the quality of the stream water is improved during its progress through the gardens. This is undoubtedly due to the number of small weirs over which the water passes, thereby causing aeration.

## TABLE I

### 135 Formal Samples.

| Nature of sample | Total Examined | Genuine | Adulterated | Percentage adulteration |
|---|---|---|---|---|
| FOODS. | | | | |
| Beef and Tongue Paste | 1 | 1 | — | — |
| Beer | 2 | 2 | — | — |
| Bread and Butter | 10 | 8 | 2 | 20 |
| Butter | 5 | 5 | — | — |
| Butter Sweets | 3 | 3 | — | — |
| Buttered Toast | 3 | 3 | — | — |
| Cake Mixture | 3 | 3 | — | — |
| Chicken, minced | 1 | 1 | — | — |
| Cider | 1 | 1 | — | — |
| Cold Milk | 4 | 2 | 2 | 50 |
| Crystallized Ginger | 2 | 2 | — | — |
| Curry Powder | 3 | 3 | — | — |
| Custard Powder | 3 | 3 | — | — |
| Dried Prunes | 3 | 3 | — | — |
| Flour, wholemeal | 2 | 2 | — | — |
| Flour, high protein | 1 | 1 | — | — |
| Fruit Juice | 3 | 3 | — | — |
| Green Ginger Wine | 3 | 3 | — | — |
| Gin | 3 | 3 | — | — |
| Glace Cherries | 1 | 1 | — | — |
| Jam | 3 | 3 | — | — |
| Lard | 6 | 6 | — | — |
| Margarine, 10% butter | 5 | 5 | — | — |
| Marzipan | 1 | 1 | — | — |
| Meat Pie | 3 | 3 | — | — |
| Milk | 13 | 2 | 11 | 84 |
| Milk, Channel Islands | 8 | 8 | — | — |
| Mincemeat | 3 | 3 | — | — |
| Pearl Barley | 2 | 2 | — | — |
| Peas, processed | 3 | 3 | — | — |
| Port Wine | 3 | 3 | — | — |

TABLE I—*continued*

| Nature of Sample | Total Examined | Genuine | Adulterated | Percentage adulterated |
|---|---|---|---|---|
| Rum ... ... ... ... | 3 | 3 | — | — |
| Sago ... ... ... ... | 3 | 3 | — | — |
| Sausages, pork ... ... ... | 5 | 3 | 2 | 40 |
| Suet, shredded ... ... ... | 1 | — | 1 | 100 |
| Tinned Salmon ... ... ... | 3 | 3 | — | — |
| Vinegar ... ... ... ... | 3 | 3 | — | — |
| Whisky ... ... ... ... | 3 | 3 | — | — |
| DRUGS. | | | | |
| Olive Oil ... ... ... ... | 6 | 6 | — | — |
| Whitfield's Ointment ... ... | 1 | 1 | — | — |
| | 135 | 117 | 18 | 13.3 |

## TABLE II

### 293 Informal Samples.

| Nature of sample | Total Examined | Genuine | Adulterated | Percentage adulteration |
|---|---|---|---|---|
| FOODS. | | | | |
| Ale ... ... ... ... | 1 | 1 | — | — |
| Angelica ... ... ... ... | 2 | 2 | — | — |
| Arrowroot ... ... ... | 3 | 3 | — | — |
| Baked Beans ... ... ... | 1 | 1 | — | — |
| Beer ... ... ... ... | 7 | 7 | — | — |
| Blackcurrant Juice ... ... | 1 | 1 | — | — |
| Bread and Butter ... ... | 1 | 1 | — | — |
| Bubble Gum ... ... ... | 2 | 2 | — | — |
| Cakes ... ... ... ... | 4 | 2 | 2 | 50 |
| Calves Feet Jelly ... ... | 2 | 2 | — | — |
| Candied Peel ... ... ... | 4 | 4 | — | — |
| Chewing Gum ... ... ... | 2 | 2 | — | — |
| Christmas Pudding ... ... | 2 | 2 | — | — |
| Coffee and Chicory Essence ... | 6 | 6 | — | — |
| Coffee and Chicory Mixture ... | 2 | 2 | — | — |
| Cooking Fat ... ... ... | 1 | 1 | — | — |
| Cornflour ... ... ... | 2 | 2 | — | — |
| Crab, dressed ... ... ... | 2 | 2 | — | — |
| Curd, banana ... ... ... | 1 | 1 | — | — |
| Curd, lemon ... ... ... | 3 | 3 | — | — |
| Custard Powder ... ... ... | 4 | 4 | — | — |
| Demerara Sugar ... ... ... | 4 | 4 | — | — |
| Dripping ... ... ... ... | 1 | 1 | — | — |
| Flour, self raising ... ... | 2 | 2 | — | — |

TABLE II—*continued*

| Nature of sample | Total Examined | Genuine | Adulterated | Percentage Adulterated |
|---|---|---|---|---|
| Frying Oil ... ... ... ... | 2 | 2 | — | — |
| Glace Cherries ... ... ... | 2 | 2 | — | — |
| Ice Cream ... ... ... | 5 | 5 | — | — |
| Ice Lollie ... ... ... ... | 9 | 8 | 1 | 12.5 |
| Junket Powder ... ... ... | 1 | 1 | — | — |
| Lemon Flavourings ... ... | 4 | 4 | — | — |
| Mayonnaise ... ... ... | 1 | 1 | — | — |
| Meat Pie ... ... ... ... | 1 | 1 | — | — |
| Meringue Powder ... ... ... | 1 | 1 | — | — |
| Milk ... ... ... ... | 34 | 27 | 7 | 20.5 |
| Milk, Channel Islands ... ... | 7 | 6 | 1 | 14 |
| Milk for chlorates ... ... | 2 | 1 | 1 | 50 |
| Milk, machine skimmed ... ... | 4 | 4 | — | — |
| Mint, dried... ... ... ... | 2 | 2 | — | — |
| Mint, in vinegar ... ... ... | 2 | 2 | — | — |
| Nutmeg, powdered ... ... | 5 | 5 | — | — |
| Orange squash ... ... ... | 2 | 2 | — | — |
| Orange Drink ... ... ... | 1 | 1 | — | — |
| Pepper, white ... ... ... | 1 | 1 | — | — |
| Pickles ... ... ... ... | 6 | 5 | 1 | 17.0 |
| Pilchards in tomato ... ... | 4 | 4 | — | — |
| Pineapple pieces ... ... | 3 | 3 | — | — |
| Pineapple juice ... ... ... | 1 | 1 | — | — |
| Pork Pie ... ... ... ... | 1 | 1 | — | — |
| Pudding Mixture ... ... | 3 | 3 | — | — |
| Rennet Essence ... ... ... | 2 | 2 | — | — |
| Sago ... ... ... ... | 5 | 5 | — | — |
| Salad Cream ... ... ... | 3 | 3 | — | — |
| Sardines ... ... ... ... | 4 | 4 | — | — |
| Sauce ... ... ... ... | 5 | 5 | — | — |
| Sausages, beef ... ... ... | 5 | 5 | — | — |
| Sausages, pork ... ... ... | 7 | 5 | 2 | 28 |
| Sausages, luncheon ... ... | 1 | 1 | — | — |
| Semolina ... ... ... ... | 4 | 4 | — | — |
| Shelled Almonds ... ... ... | 1 | — | 1 | 100 |
| Shelled Walnuts ... ... ... | 3 | 3 | — | — |
| Sherbet ... ... ... ... | 4 | 4 | — | — |
| Shredded Suet ... ... ... | 2 | 1 | 1 | 50 |
| Sugar Confectionery ... ... | 1 | 1 | — | — |
| Steak and Kidney Pie, tinned ... | 1 | 1 | — | — |
| Stuffing ... ... ... ... | 4 | 4 | — | — |
| Sweets, medicated ... ... | 2 | 2 | — | — |
| Table Jelly ... ... ... | 4 | 4 | — | — |
| Tinned Fruit ... ... ... | 5 | 5 | — | — |
| Tinned Vegetables ... ... | 3 | 3 | — | — |
| Tomato Ketchup ... ... | 1 | 1 | — | — |
| Vinegar, tarragon ... ... | 1 | 1 | — | — |
| Vinegar, distilled malt ... ... | 1 | 1 | — | — |
| DRUGS. | | | | |
| Cascara Evacuant ... ... | 3 | 3 | — | — |
| Catarrh Pastilles ... ... ... | 4 | 4 | — | — |

| Nature of sample | Total Examined | Genuine | Adulterated | Percentage adulterated |
|---|---|---|---|---|
| Citric Acid ... ... ... | 3 | 3 | — | — |
| Cream of Tartar ... ... ... | 4 | 4 | — | — |
| Digestive Tablets ... ... ... | 4 | 4 | — | — |
| Glycerine of Thymol ... ... | 4 | 4 | — | — |
| Iodine, colourless ... ... ... | 4 | 4 | — | — |
| Jelloids ... ... ... ... | 1 | 1 | — | — |
| Liquid Paraffin ... ... ... | 4 | 4 | — | — |
| Magnesium Carbonate, comp ... | 4 | 4 | — | — |
| Olive Oil ... ... ... ... | 1 | 1 | — | — |
| Sanatogen ... ... ... | 1 | 1 | — | — |
| Seidlitz Powders ... ... ... | 4 | 4 | — | — |
| Sleeping Tablets ... ... | 1 | 1 | — | — |
| Sunburn Cream ... ... ... | 2 | 2 | — | — |
| Tonic Capsules ... ... ... | 1 | 1 | — | — |
| Whitfield's Ointment ... ... | 4 | 3 | 1 | 25 |
| Witch Hazel ... ... ... | 5 | 5 | — | — |
| Witch Hazel Ointment ... ... | 2 | 2 | — | — |
| Zinc and Castor Oil Ointment ... | 4 | 4 | — | — |
| | 293 | 275 | 18 | 6.14 |

## TABLE III

### Adulterated Formal Samples.

| *Sample No.* | *Nature* | *Adulteration or Irregularity* |
|---|---|---|
| 530 | Bread and Butter ... | 83% margarine, 17% butter. |
| 535 | Bread and Butter ... | 86.2%margarine, 13.8% butter. |
| 536 | Cold Milk ... ... ... | 7.7% fat deficient. |
| 539 | Cold Milk ... ... ... | 17% fat deficient. |
| 257 | Milk ... ... ... | 2.2% deficient in solids not fat. |
| 258 | Milk ... ... ... | 2.4% deficient in solids not fat. |
| 260 | Milk ... ... ... | 7.7% deficient in fat and 4.2% deficient in solids not fat. |
| 261 | Milk ... ... ... | 1.4% deficient in solids not fat. |
| 262 | Milk ... ... ... | 8.3% deficient in fat and 4.2% deficient in solids not fat. |
| 263 | Milk ... ... ... | 2.4% deficient in solids not fat. |
| 264 | Milk ... ... ... | 0.5% deficient in solids not fat. |
| 265 | Milk ... ... ... | 10% deficient in fat and 3.1% deficient in solids not fat. |
| 266 | Milk ... ... ... | 2.7% deficient in solids not fat. |
| 268 | Milk ... ... ... | 3.3% deficient in fat and solids not fat low but freezing point –0.553 degrees Centigrade. |
| 269 | Milk ... ... ... | Irregular. Solids not fat low but freezing point –0.552 degrees Centigrade. |
| 277 | Pork Sausages ... ... | Deficient in meat by 22%. |
| 283 | Pork Sausages ... ... | Deficient in meat by 27.7%. |
| 1058 | Shredded Suet ... ... | 5.3% deficient in beef. |

## TABLE IV

### Adulterated Informal Samples.

| *Sample No.* | *Nature* | *Adulteration or Irregularity* |
|---|---|---|
| E.29 | Cream Horn ... ... | Contained synthetic Cream. |
| E.31 | Cream Slice ... ... | Contained synthetic Cream. |
| G.1 | Iced Lollie ... ... | 7.9 p.p.m. excess of copper. |
| E.13 | Milk ... ... ... | 3.3% deficient in Milk Fat. |
| E.15 | Milk ... ... ... | 1.7% deficient in Milk Fat. |
| E.21 | Milk ... ... ... | Irregular—solids not fat low but freezing point –0.537 degrees Centigrade. |
| E.22 | Milk ... ... ... | 10% deficient in fat. Solids not fat low but freezing point –0.537 degrees Centigrade. |
| E.23 | Milk ... ... ... | 17% deficient in fat. |
| E.27 | Milk ... ... ... | 20% deficient in fat. |
| F.17 | Milk ... ... ... | Presence of traces of hypochlorites. |
| E.1 | Milk ... ... ... | 1.2% deficient in solids not fat. |
| A.105 | Milk, Channel Islands ... | 86% deficient in Milk Fat. |
| C.25 | Pork Sausages ... ... | Deficient in meat by 5.1%. |
| C.27 | Pork Sausages ... ... | Deficient in meat by 14.8%. |
| A.93 | Shelled Almonds ... | Unfit for human consumption. |
| J.39 | Shredded Suet ... ... | 15.6% deficient in Beef. |
| F.43 | Sweet Pickle ... ... | 140 p.p.m. excess of lead. |
| D.17 | Whitfield's Ointment ... | Deficient in Benzoic Acid by 5.29% and salicylic acid by 0.80 parts per 100 parts of ointment. |

## TABLE V

### Milk (excluding Channel Islands Milk)

Average percentage of Fat and Solids not Fat.

| *Quarter* | *No. of Samples* | *Percentage Fat* | *Percentage Solids not Fat* |
|---|---|---|---|
| 1 | 33 | 3.31 | 8.51 |
| 2 | 14 | 2.93 | 8.55 |
| 3 | — | — | — |
| 4 | — | — | — |
| For whole period | 47 | 3.19 | 8.52 |

## TABLE VI

### Channel Islands Milk

Average percentage of Fat and Solids not Fat.

| *Quarter* | *No. of Samples* | *Percentage Fat* | *Percentage Solids not Fat* |
|---|---|---|---|
| 1 | 3 | 4.27 | 8.87 |
| 2 | 3 | 4.24 | 9.11 |
| 3 | 3 | 4.47 | 8.95 |
| 4 | 6 | 3.81 | 8.98 |
| For whole period | 15 | 4.11 | 8.91 |

## TABLE VII

### Special Samples.

| *No.* | *Nature* | *Reported* |
|---|---|---|
| F.(S) 1 | Luncheon Meat ... | Fit for human consumption. |
| F.(S) 2 | Pickled Walnuts ... | Poor quality malt vinegar or mixture of artificial and malt vinegar. |
| S.B.1 | Tinned Mushroom Soup | Fit for human consumption |
| D.4 (S) | Harris Polony ... ... | Slightly rancid. |
| D.5 (S) | Tinned Tomatoes ... | Fit for human consumption. |
| F.3 (S) | Ice Cream ... ... | Streak of dye—harmless. |
| F.4 (S) | "Milk" ... ... ... | Emulsion of soluble mineral oil—no milk fat. |
| — | Soluble Oil Emulsion ... | Identical with sample F.4 (S). |
| D.6 (S) | Rissole ... ... ... | Fit for human consumption. |
| J.1 (S) | Iced Lollie ... ... | Fit for human consumption. |
| F.5 (S) | Prawns ... ... ... | Slight putrefaction—unfit for human consumption. |
| H.2 (S) | Tinned Apples ... ... | Fit for human consumption. |
| D.7 (S) | Shelled Walnuts ... | Contained mouse excreta. |
| — | Tomatoes ... ... | Negligible quantities of arsenic and copper. |
| — | Black smuts from roof of car ... ... ... | Derived from Fuel Oil Burners. |
| A.1 (S) | Cooked English Plums | Gum harmless—sample fit for human consumption. |
| F.6 (S) | Slices of Bread ... ... | Brown masses consisted of wholemeal flour—objectionable but harmless. |
| D.8 (S) | Deposit from water ... | Calcium Carbonate with traces of iron. |
| — | Water and tablet ... | Water contained excess of copper. |
| A.6 (S) | Iron Tonic Cup ... ... | Sample in good condition. |
| A.4 (S) | Tinned Processed Peas | Old stock—recommended withdrawal. |
| A.3 (S) | Pickled Walnuts ... | Vinegar mixture of vinegar and water or deteriorated—old stock. |
| A.2 (S) | Calves Feet Jelly ... | Fit for human consumption. |
| E.3 (S) | Plain Flour ... ... | Low grade flour—not unfit for human consumption. |
| B.2 (S) | Milk ... ... ... | Normal Milk, fit for human consumption. |
| B.3 (S) | Milk ... ... ... | Normal Milk, fit for human consumption. |
| A.5 (S) | Tinned Irish Stew ... | Fit for human consumption. |
| — | Ditch Water, Kinson ... | Water heavily polluted. |
| — | Stream water, Northbourne Golf Links ... | High copper content, toxic to fish. |

## TABLE VIII

### Samples examined under the Fertilisers and Feeding Stuffs Act, 1926.

FERTILISERS.

| | *Total* | *Satisfactory* | *Unsatisfactory* |
|---|---|---|---|
| *Formal.* | | | |
| Liquinure ... ... ... ... | 1 | 1 | — |
| Sangral ... ... ... ... | 1 | — | 1 |
| Sulphate of Ammonia ... ... | 2 | 2 | — |
| Basic Slag ... ... ... ... | 1 | 1 | — |
| Meat and Bone Fertiliser ... ... | 1 | 1 | — |

TABLE VIII—*continued*

| | | | |
|---|---|---|---|
| Superphosphate ... ... ... | 2 | 2 | — |
| Hydrated Garden Lime ... ... | 1 | 1 | — |
| Bone Meal ... ... ... ... | 1 | 1 | — |
| *Informal.* | | | |
| Liquinure ... ... ... ... | 2 | 1 | 1 |
| Sangral ... ... ... ... | 1 | — | 1 |
| Nitrate of Soda ... ... ... | 1 | 1 | — |
| Clay's Fertiliser ... ... ... | 1 | — | 1 |
| Hydrated Garden Lime ... ... | 1 | — | 1 |
| Hydrated Lime ... ... ... | 1 | — | 1 |
| Fisons Hop Manure ... ... ... | 1 | — | 1 |
| Plantoids ... ... ... ... | 1 | — | 1 |
| FEEDING STUFFS. | | | |
| *Formal.* | | | |
| Layers Pellets ... ... ... | 2 | 1 | 1 |
| Layers Mash ... ... ... ... | 2 | 2 | — |
| Layers Meal ... ... ... ... | 1 | 1 | — |
| Laying Meal ... ... ... | 1 | 1 | — |
| Intensive Layers Meal ... ... | 1 | 1 | — |
| *Informal.* | | | |
| Layers Mash ... ... ... ... | 1 | 1 | — |
| Layers Meal ... ... ... ... | 1 | — | 1 |

COUNTY BOROUGH OF BOURNEMOUTH

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EDUCATION COMMITTEE

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# Annual Report

of the

# Principal School Medical Officer

Year 1956

To the Chairman and Members of the Education Committee.

Mr. Chairman, Ladies and Gentlemen,

I have pleasure in submitting my third Annual Report as Principal Medical Officer to the Education Committee, the forty-ninth of a series dealing with the health of children attending your schools.

There have been no serious epidemics of any kind and the health of the children has been generally good, although routine physical examination showed there are still a few children suffering from "malnutrition", to use an old but expressive word now abandoned in these Reports. These children were often found in families with low standards of child care, not necessarily because of an inadequate income, but because money was squandered on inessentials, and too small a proportion spent on wholesome food and clothing. Your School Nurses have made great efforts to impress on these parents the rudiments of child care, but progress has been slow in many cases.

The routine medical examination of school children has continued and has considerable merit, but there is a feeling among many School Medical Officers that the whole system of School health supervision needs overhaul. Much that was vitally necessary fifty years ago can now be safely abandoned, leaving time and energy for more useful pursuits, while still keeping in mind the essentially preventive nature of the Service.

The Handicapped Child has always presented a special problem, and the "hard core" of disability, due to congenital weakness of mind or body, has been largely untouched by advances, in our knowledge. By early recognition, many disabilities can be arrested and cured, and even in those inborn conditions where cure is beyond the power of medicine, early recognition and the use of specialised teaching methods offer the child in many cases an opportunity of becoming self-supporting in later life. Bournemouth is fortunate in having a comparatively low rate of handicap among its school-children, and details of the various categories have been given in the body of the Report.

Child Guidance has become increasingly useful as a means of diagnosing and treating children with emotional and behaviour

difficulties, whose inability to fit into the normal educational background makes problems for teachers and doctors alike. Here again, early recognition of the problem is half the battle, and far too many children have been allowed by misguided but well-meaning parents to reach a stage of emotional maladjustment that will take years to resolve, if complete stability is possible at all. The Report of Dr. W. H. Whiles, the Consultant Children's Psychiatrist, together with the brief case summaries given from time to time to the Education Committee, show how wide is the range of activity in Child Guidance work and its ramifications into all intellectual levels in our schools.

The same preventive outlook has been fostered in the School Dental Service, described by Mr. A. A. Wood, the Chief Dental Officer. In addition to the routine duties of inspection, repair or removal of damaged teeth, all four school dentists undertake orthodontic treatment.

Health Education in the schools has been intensified, and Mothercraft talks have been given at Avonbourne School, and more recently at Bournemouth School for Girls, and East Howe Secondary School.

In concluding the introduction to my Report, my thanks are due to you, Mr. Chairman, to the Members of the Education Committee and to your Chief Officer, Mr. W. R. Smedley, for your close and willing co-operation.

Finally, I sincerely thank my staff for their conscientious work in maintaining the high tradition of the School Health Service.

I am,

Yours faithfully,

WILLIAM FIELDING.

# SCHOOL HEALTH SERVICE STAFF.

(As at 31st December, 1956).

---

*Principal School Medical Officer* :

WILLIAM FIELDING, M.D., B.SC., D.P.H.

*Deputy Principal School Medical Officer* :

J. H. MAUGHAN, M.B., B.S., D.P.H.

*School Medical Officers* :

CHARLES J. SANDERSON, M.R.C.S., L.R.C.P., D.P.H.

FRANZ A. HEIMANN, L.R.C.P., L.R.C.S., L.R.F.P.S., M.D.(Breslau)

PAULINE K. KEATING, L.R.C.S.(I), L.R.C.P.(I), L.M., D.C.H.

*Principal School Dental Officer* :

A. A. WOOD, L.D.S., R.C.S.

*School Dental Officers* :

H. S. HOOPER, B.D.S., L.D.S., R.C.S.

F. E. LOCKWOOD, B.D.S. (Univ. L'pool)

W. J. MACKILLOP, L.D.S. (Hons.), R.F.P.S. (Glas.).

*Dental Attendants* :

H. ALLEN, D. M. COX, B. M. READ, N. WOODS

*Consultant Children's Psychiatrist (Part-time)* :

*W. H. WHILES, M.R.C.S., L.R.C.P., D.P.M.

*Educational Psychologist* :

B. WORTHINGTON FOXLEY, B.SC.(Hons.), P.G.A.D.P.

*Psychiatric Social Worker* :

J. HIGGINS

*Ophthalmic Surgeons (Part-time)* :

*E. P. TULLOH, M.B., B.S., D.O.M.S.

*E. R. BOWES, M.D., B.S., D.O.M.S.

*Orthoptist (Part-time)* :

*P. FARIS, D.B.O.

** Employed by South West Metropolitan Regional Hospital Board.*

*Orthopaedic Surgeons (Part-time)* :

Services provided by Surgeons from Lord Mayor Treloar Orthopaedic Hospital.

*Physiotherapist-in-charge*:
E. O. Joseph, M.C.S.P.

*Assistant Physiotherapist* :
J. Davey, M.C.S.P.

*Speech Therapist* :
V. Abelson

*Superintendent Health Visitor and School Nurse*:
W. Melhuish

*Health Visitors and School Nurses* :

L. M. Austin
C. V. Bailey
P. A. Brierley
P. M. Carey
M. G. Cornish
F. Darlington
M. H. Dutton
E. M. Gibbs
M. J. Grosvenor
C. C. Hannan
E. M. Litten
G. M. Lunn
S. Rodd
G. E. C. Steel
B. Turner
E. Turner
J. Wilkinson

*Clerk in charge of School Health Service Section* :
F. J. Goode

*Clerks* :
E. G. Payne, M. H. W. Watton, J. L. Watts,
B. Johnson (Child Guidance Centre)

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## SCHOOLS AND SCHOLARS

| | |
|---|---|
| Number of Primary Schools ... ... ... ... | 34 |
| Number of Secondary Modern Schools ... ... | 8 |
| Number of Secondary Grammar Schools ... ... | 2 |
| Average attendance ... ... ... ... | 15,133 |
| Average number on School Registers ... ... | 16,361 |

## A TABLE SHOWING THE NUMBER AND NATURE OF THE DEFECTS FOUND DURING EXAMINATION OF CHILDREN IN THE PRESCRIBED AGE-GROUPS AND OF OTHERS "PERIODICALLY INSPECTED".

| DEFECTS | Entrants 1,097 | | Children Aged 10 1,608 | | Children Aged 14 1,129 | | Other Periodic Inspections 1,517 | |
|---|---|---|---|---|---|---|---|---|
| | Treatment | Observation | Treatment | Observation | Treatment | Observation | Treatment | Observation |
| Skin ... ... ... | 6 | 21 | 9 | 19 | 6 | 28 | 19 | 32 |
| Eyes :— | | | | | | | | |
| (a) Vision ... ... | 6 | — | 200 | 48 | 188 | 30 | 335 | 26 |
| (b) Squint ... ... | 24 | 1 | 24 | 2 | 14 | 2 | 20 | — |
| (c) Other ... ... | 3 | 12 | 4 | 11 | 1 | 11 | 3 | 23 |
| Ears :— | | | | | | | | |
| (a) Hearing ... ... | 2 | 4 | 12 | 3 | 8 | 2 | 8 | 3 |
| (b) Otitis Media ... | 2 | 1 | 2 | 1 | 3 | 1 | 1 | — |
| (c) Other ... ... | — | 4 | 1 | 1 | 15 | 24 | 9 | 4 |
| Nose or Throat ... ... | 18 | 97 | 14 | 79 | 5 | 48 | 11 | 53 |
| Speech ... ... ... | 8 | 6 | 10 | 2 | 2 | — | 8 | — |
| Glands ... ... ... | — | 20 | — | 8 | — | 4 | — | 9 |
| Heart ... ... ... | 2 | 7 | 3 | 5 | 1 | 5 | 4 | 5 |
| Lungs ... ... ... | 3 | 6 | 6 | 4 | 3 | — | 2 | 4 |
| Developmental :— | | | | | | | | |
| (a) Hernia ... ... | 2 | — | 1 | — | 1 | — | 2 | — |
| (b) Other ... ... | 1 | 3 | 12 | 31 | 1 | 12 | 9 | 18 |
| Orthopaedic :— | | | | | | | | |
| (a) Posture ... ... | 6 | 2 | 51 | 5 | 52 | 13 | 57 | 16 |
| (b) Flat Foot ... ... | 12 | 2 | 19 | 7 | 3 | — | 14 | 4 |
| (c) Other ... ... | 27 | 9 | 23 | 6 | 21 | 17 | 29 | 13 |
| Nervous System :— | | | | | | | | |
| (a) Epilepsy ... ... | 1 | — | 2 | — | 2 | 2 | — | — |
| (b) Other ... ... | — | 1 | 1 | — | 1 | — | — | 1 |
| Psychological :— | | | | | | | | |
| (a) Development ... | 2 | 1 | 16 | 2 | 1 | 2 | — | — |
| (b) Stability ... ... | — | 5 | 8 | 1 | 1 | 1 | 3 | — |
| Abdomen ... ... ... | — | — | — | — | — | — | — | — |
| Other ... ... ... | — | — | — | — | — | — | 1 | 1 |
| | 125 | 202 | 418 | 235 | 329 | 202 | 535 | 212 |

## MEDICAL INSPECTION

No material change has taken place in the system of routine medical examination undertaken during this year, and the three examinations prescribed for each pupil by the School Health Service and Handicapped Pupils Regulations, 1953, have applied to a total of 3,834 children, with the addition of 1,517 examinations for special purposes.

A change has been instituted by Administrative Memorandum No. 514 (September, 1955) in the classification of the child's physical condition, which is now simplified into two categories, "Satisfactory" and "Unsatisfactory", and replaces the former three categories A (Good), B (Fair), and C (Poor). Whether this is an adequate classification remains to be seen. It can certainly not be claimed to be a scientific appraisal of a child's physical condition, which can only be properly made by careful weighing and measuring, together with some account being taken of the hereditary factor, the physique of the parents.

The Ministry has also required certain additional information, the number of school children who have had their tonsils removed, a stricter estimate of the hearing acuity of school leavers, information about children supplied with hearing aids, details of orthodontic treatment and of children supplied with artificial dentures.

These special examinations, with the addition of an intensified campaign to prevent infectious illnesses by various inoculations, have strained our resources in medical and dental manpower to the limit, and we have been fortunate in that during the year under review, a full staff has been available.

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## FINDINGS OF MEDICAL INSPECTION

(a) *Uncleanliness.*

The incidence of uncleanliness has now declined to a point when it must be seriously considered whether the labour and energy expended in cleanliness surveys are worth while. In nearly 40,000

examinations, only 79 cases of uncleanliness were discovered, and many of these were of a minor nature and most of them were concentrated in a few schools situate in areas where the general standards of the population were perhaps rather lower than elsewhere in the Borough.

Arrangements for dealing with cases of uncleanliness have continued unchanged, and there are ample facilities for parents to deal with infestation should it occur, either by private arrangement or through the School Health Service.

(b) *General Condition.*

There has been a steady improvement in the physique of school children during the last twenty years, and although it is difficult to compare results based upon classifications such as "Good", "Fair" and "Poor", or "Satisfactory" and "Unsatisfactory", which depend so much upon individual judgment, there can be no doubt that children today are generally far finer physical specimens than those of a generation or two ago.

A record has been kept during the year of the heights and weights of children attending for routine examinations, which confirms this impression.

| Age Groups (1) | Number of Pupils Inspected (2) | Satisfactory | | Unsatisfactory | |
|---|---|---|---|---|---|
| | | No. (3) | % of Col. 2 (4) | No. (5) | % of Col. 2 (6) |
| Entrants | 1097 | 1087 | 99.09 | 10 | .91 |
| 10 Years | 1608 | 1594 | 99.13 | 14 | .87 |
| 14 Years | 1129 | 1121 | 99.29 | 8 | .71 |
| Others | 1517 | 1505 | 99.21 | 12 | .79 |
| | 5351 | 5307 | 99.18 | 44 | .82 |

| Age Group | No. Examined | Total Height | Average Height | Total Weight | Average Weight |
|---|---|---|---|---|---|
| | | ft. ins. | ft. ins. | st. lbs. ozs. | st. lbs. ozs |
| 1953 Boys | 11 | 35 6 | 3 2¾ | 29 12 2 | 2 10 0 |
| Girls | 16 | 51 5¼ | 3 2½ | 41 12 2 | 2 8 10 |
| 1952 Boys | 79(1) | 267 3¼ | 3 5⅛ | 224 4 15 | 2 12 4 |
| Girls | 82 | 279 10 | 3 5 | 239 1 12 | 2 12 13 |
| 1951 Boys | 477(5) | 1717 0¼ | 3 7⅝ | 1393 6 7 | 2 13 5 |
| Girls | 432(4) | 1531 3½ | 3 6⅞ | 1299 1 12 | 3 0 8 |
| 1950 Boys | 115(1) | 435 3¼ | 3 9¾ | 398 5 1 | 3 6 14 |
| Girls | 120 | 447 10½ | 3 8⅞ | 400 10 14 | 3 4 12 |
| 1949 Boys | 37 | 146 1⅜ | 3 11⅜ | 139 12 4 | 3 10 10 |
| Girls | 33 | 131 2½ | 3 11⅝ | 125 7 4 | 3 11 4 |
| 1948 Boys | 8 | 33 2⅜ | 4 1¾ | 33 4 0 | 4 2 4 |
| Girls | | | | | |
| 1947 Boys | 2 | 8 5 | 4 2½ | 8 12 4 | 4 6 2 |
| Girls | | | | | |
| 1946 Boys | 820(2) | 3674 0⅝ | 4 5⅞ | 4059 5 3 | 4 13 7 |
| Girls | 788(4) | 3494 8⅜ | 4 5½ | 3897 2 10 | 4 3 14 |
| 1945 Boys | 34 | 158 7⅛ | 4 8 | 188 10 5 | 5 7 11 |
| Girls | 114(1) | 541 9⅜ | 4 9½ | 664 13 3 | 5 12 6 |
| 1944 Boys | 158(1) | 772 8½ | 4 11 1/16 | 1011 4 8 | 6 6 3 |
| Girls | 151(1) | 732 2⅛ | 4 10 9/16 | 1006 12 7 | 6 9 15 |
| 1943 Boys | 132 | 668 9¾ | 5 0 13/16 | 942 7 10 | 7 1 15 |
| Girls | 87 | 441 10¼ | 5 0 15/16 | 661 8 12 | 7 8 7 |
| 1942 Boys | 584(1) | 2989 8 | 5 1½ | 4282 0 14 | 7 4 13 |
| Girls | 545(1) | 2794 0⅞ | 5 1⅝ | 4139 0 3 | 7 8 8 |
| 1941 Boys | 123 | 661 3¾ | 5 4 1/16 | 1023 5 0 | 8 4 7 |
| Girls | 108 | 572 2 | 5 3 9/16 | 896 6 7 | 8 4 3 |
| 1940 Boys | 23 | 127 9½ | 5 6 1/16 | 206 12 10 | 8 13 15 |
| Girls | 114 | 610 0⅝ | 5 4 3/16 | 1013 13 0 | 8 12 8 |
| 1939 Boys | 3 | 16 3½ | 5 4 3/16 | 27 4 8 | 9 1 8 |
| Girls | 72 | 389 11⅜ | 5 4 5/16 | 658 6 0 | 9 2 0 |
| 1938 Boys | 21 | 121 1¾ | 5 9⅜ | 213 13 8 | 10 2 10 |
| Girls | 37 | 198 8 | 5 4 7/16 | 333 11 0 | 9 0 5 |
| 1937 Boys | 12 | 70 1 | 5 10 1/12 | 124 0 0 | 10 4 10 |
| Girls | 13 | 69 6⅛ | 5 4 2/13 | 120 8 0 | 9 3 13 |

(c) *Minor Ailments.*

During 1956, no cases of ringworm of the scalp were discovered, and only one case of scabies and one case of ringworm of the body occurred.

Most of the treatment for minor ailments, which prior to 1948 was carried out through the School Health Service, is now undertaken by family doctors.

(d) *Vision.*

Defective vision, if not corrected early, may profoundly affect a child's educational progress, and is one of the few conditions that is commoner than it was a generation or two ago, and continues to increase.

**PERCENTAGE OF DEFECTIVE VISION FOUND AT ROUTINE MEDICAL EXAMINATION OF "ENTRANTS", "INTERMEDIATES" and "LEAVERS", 1950-56**

| 1950 | 1951 | 1952 | 1953 | 1954 | 1955 | 1956 |
|---|---|---|---|---|---|---|
| 7.6 | 7.2 | 8.5 | 9.0 | 6.9 | 10.4 | 12.3 |

Cases of "Squint" have similarly shown an increase during the same period, the numbers in the years 1950-56 being 38, 39, 51, 67, 77, 56 and 67 among children attending for routine medical examination, and forming between 1 per cent. and 2 per cent. of the children examined.

All cases of eye defect are reported to the child's parents who may seek treatment either through their own arrangements or through the hospital clinics held at "Avebury" and Pokesdown.

(e) *Defects of the Nose and Throat.*

Defects of the nose and throat are common in childhood but frequently remedy themselves or retrogress with conservative treatment. There are wide variations throughout the country in the proportion of children having tonsils and adenoids removed surgically and in order to obtain a clear picture, the Ministry has asked for a return showing the number of children, examined at routine medical inspections during 1956, who had had their tonsils removed.

It was found that of 5,351 children examined, 1,492 (or 27.8 per cent.) had received operative treatment in the past, and while the proportion was low among the younger children, it was often 30-40 per cent. or more among the older age groups.

The waiting list for this operation is a long one, so that the ordinary case must wait something like 18 months before admission, although urgent cases can be admitted much more quickly. All cases are seen by the surgeon before operation, and there is thus an opportunity for those cases where the need for operation no longer exists through spontaneous "cure" to avoid this (often unnecessary) operation.

During the year 512 children had their tonsils and adenoids removed, compared with 493 during 1955.

(f) *Treatment of Children in Hospital.*

The following information is given from hospital discharge reports received during the year :—

| | *Group of Diseases* | *No. of Children* |
|---|---|---|
| 1. | Infections or Parasitic Diseases ... ... ... ... | 37 |
| 2. | Neoplasms (a) Benign ... ... ... ... ... | 3 |
| | (b) Malignant ... ... ... ... ... | — |
| 3. | Allergic, Endocrine, Metabolic and Nutritional ... ... | 7 |
| 4. | Diseases of blood and blood forming organs ... ... | 3 |
| 5. | Mental, Psychoneurotic ... ... ... ... ... | — |
| 6. | Diseases of Nervous System and Special Senses ... ... | *49 |
| 7. | Diseases of Circulatory System and Lymphatics ... ... | 2 |
| 8. | Diseases of Respiratory System ... ... ... ... | †519 |
| 9. | Diseases of Digestive System ... ... ... ... | 52 |
| 10. | Genito-Urinary System ... ... ... ... ... | 11 |
| 11. | Skin and Cellular Tissues ... ... ... ... ... | 7 |
| 12. | Bones, etc. ... ... ... ... ... ... ... | 194 |
| 13. | Accidents, Poisoning and Violence ... ... ... ... | 65 |

* Includes 26 operations for "squint".
† Includes 512 cases for tonsillectomy.

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## MINOR AILMENTS CLINICS

As has been remarked in previous Reports, the need for Minor Ailments Clinics is gradually declining as more and more children attend their own doctors under the National Health Service arrangements. Nine Clinics continued to function, but the number of sessions at four of them were reduced, and a total of 3,679 attendances were made compared with 4,590 in 1955.

## LIST OF CLINICS HELD FOR SCHOOL CHILDREN

| | MONDAY | TUESDAY | WEDNESDAY | THURSDAY | FRIDAY |
|---|---|---|---|---|---|
| **Minor Ailments Clinics.** | | | | | |
| Malmesbury Park : 70, Stewart Road | — | — | — | — | Morning |
| Winton : Somerley Road ... ... | Afternoon | — | — | — | — |
| Pokesdown : 896, Christchurch Road | — | — | Morning | — | — |
| East Howe : Hadow Road ... ... | Morning | — | — | — | Morning |
| Charminster : East Way ... ... | Afternoon | — | — | Morning | — |
| Southbourne : Gospel Hall, Cranleigh Rd. | — | — | Morning | — | — |
| Kinson : C.P. School, Poole Lane ... | — | — | — | Morning | — |
| West Howe : At South Kinson C.P. Infants' School, Mount Road ... | Morning | — | — | — | Morning |
| Summerbee County Secondary School, Mallard Road ... ... ... | — | — | — | Morning | — |
| **Dental Clinics.** | | | | | |
| Central : 10, Madeira Road ... ... | Morning and Afternoon | Morning and Afternoon | Morning and Afternoon | Morning and Afternoon | Morning and Afternoon |
| Pokesdown : 896, Christchurch Road | Do. | Do. | Do. | Do. | Do. |
| Winton : 19, Cranmer Road ... ... | Do. | Do. | Do. | Do. | Do. |
| East Howe : Hadow Road ... ... | Do. | Do. | Do. | Do. | Do. |
| **Eye Clinics.** | | | | | |
| Central : 10, Madeira Road ... ... | Morning and Afternoon | — | Morning | — | — |
| Pokesdown : 896, Christchurch Road | — | — | — | Morning | — |
| **Child Guidance Centre.** | | | | | |
| 896, Christchurch Road, Pokesdown ... | Morning and Afternoon | Morning and Afternoon | Morning, Afternoon and Evening | Morning and Afternoon | Morning and Afternoon |

**Children's Orthopaedic Clinic,**
70, Stewart Road

- Surgeon's sessions—1st and 3rd Wednesdays (p.m.) each month (1 surgeon) ;
- 2nd and 4th Wednesdays (p.m.) each month (2 surgeons)
- Physiotherapy—daily by appointment.

## TREATMENT OF VISUAL DEFECTS

The Ophthalmic Clinics at "Avebury" and Pokesdown have continued to be staffed by Ophthalmic Surgeons of the Regional Hospital Board, and the arrangement has again proved to be a very satisfactory one.

During the year 452 new cases were examined, compared with 411 in 1955, and spectacles were prescribed for the first time in 302 cases (247 in 1955).

| | |
|---|---|
| Number of children examined ... ... | 1,524 |
| Number of attendances ... ... ... | 1,824 |
| Number of children for whom glasses were prescribed ... ... ... ... | 681 |

### Orthoptic Clinic.

Fifty-two new cases were referred for orthoptic treatment by the Ophthalmic Surgeons and a total of 229 cases were under treatment during the year, making in all 1,044 attendances.

Twenty-six children received operative treatment for "squint".

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## ORTHOPAEDICS.

It is perhaps surprising that at a time when the general physique of children is better than ever before, the number of cases referred to the Orthopaedic Clinic continues to increase, and the majority of cases have been referred for postural defects.

It is to be doubted whether, in the large school classes, that are unfortunately common today, sufficient time can be given to physical education, and unfortunately too, among people of all ages, the art of walking correctly is in danger of becoming lost.

**Details of attendances for the past year are as follows :—**

| | |
|---|---|
| Number of scholars seen by the surgeons ... ... ... | 547 |
| Number of new cases ... ... ... ... ... ... | 270 |

**Defects found.**

| | |
|---|---|
| Genu Valgum/Genu Varum and other knee defects ... | 77 |
| Spastic conditions ... ... ... ... ... ... | 15 |
| Due to Anterior Poliomyelitis ... ... ... ... | 20 |
| Spinal Curvature and Poor Posture ... .. .. | 40 |
| Congenital dislocation of the hip ... .. .. ... | 6 |
| Deformities of the foot ... ... .. .. ... | 304 |
| Torticollis ... ... ... .. .. .. ... | 4 |
| Other conditions ... ... ... ... ... ... | 81 |

Two full-time physiotherapists attend the surgeons' sessions and beyond this, hold classes for remedial exercises. They also give electrical and ultra violet light treatment.

During the year 4,983 attendances were recorded, 4,173 for individual treatments and 678 for class treatments. 391 new patients were treated.

82 children were received as in-patients at the Lord Mayor Treloar Orthopaedic Hospital and 18 others at the Royal Victoria Hospital, Boscombe.

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## SPEECH THERAPY

Speech defects formed (with the exception of educational subnormality) the largest single group on the Handicapped Children's Register, and although many of these were in themselves of a comparatively minor nature, they were often a manifestation of some deeper emotional disturbance.

During the year, owing to an increased volume of work, efforts were made to rearrange the Speech Therapist's Sessions so that more children could be treated, less time was spent by the child away from school, and the mother could attend with the child whenever possible. Speech therapy classes must inevitably be small, as treatment is as near as possible on an individual basis, and the mothers' attendance goes far to ensure her co-operation and continuation of therapy at home.

During the year, 124 cases were treated by the Speech Therapist, and 36 cases were discharged.

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## TUBERCULIN TESTING OF SCHOOL CHILDREN

Tuberculin Testing has continued on a limited scale during the year ; 513 "entrants" being tested by the Heaf method during December. Of these 17 gave a positive reaction, showing evidence of previous exposure to infection, but 10 of them had received BCG vaccination, leaving only 7 children who had been naturally exposed to tuberculous infection. A follow-up through the Chest Clinic was undertaken in these cases, and the proportion of 7 new "positives" among 513 school entrants (1.4 per cent.) can be considered a low figure and considerably below that found in industrial areas.

During the year a sputum positive case of tuberculosis was discovered in a master in one of the boy's schools, and with the very ready co-operation of the Senior Chest Physician practically the whole of the School was tuberculin tested and the staff had chest X Rays.

Analysis of the tuberculin tests showed the following result, which is within normal limits for the age groups concerned :—

| Age ... ... | 11 + | 12 + | 13 + | 14 + | 15 + | 16 + |
|---|---|---|---|---|---|---|
| % Positive | 6 | 16 | 20 | 22 | 25 | 33 |

All boys having a positive tuberculin test had their chests X-Rayed, but there were no findings of any significance among either boys or staff, and no evidence that the master concerned had infected anybody else.

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## ULTRA VIOLET RAY CLINIC

This clinic has again been available throughout the year for children considered in need of such treatment. There is no doubt that in certain conditions of general debility particularly following some severe illness a course of Ultra Violet Light can act as a most useful tonic.

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## CHILD GUIDANCE

During the present century considerable advances have been made in the understanding, not only of the processes of mental functioning, but of the reasons which lie behind individual behaviour. More and more it is becoming realised that the aberrations of childhood may foreshadow more serious mental states in the adolescent and adult, and the Report of the Committee on Maladjusted Children, published in 1955, emphasised the fundamental importance of the prevention of maladjustment, not only by its early detection, but by the promotion of a healthy emotional atmosphere in which the seeds of maladjustment could not flourish.

Although in some cases maladjustment begins in the toddler stage, it is usually in school that the earliest deviations from normal emotional development are seen, and it is there that skilled observers can recognise them. Many emotional problems in childhood have a basis of educational strain, and can be solved by some adjustment within the educational sphere. In others the home environment requires modification, difficult to achieve in these days of often

cramped living conditions, and in other cases again the whole parent-child relationship must be taken into account.

As will be seen from the report of Dr. W. H. Whiles, the Consultant Child Psychiatrist, the cases referred to him during the year covered a very wide field of symptomatology but while some of them responded readily to treatment, in others the trouble was so deep seated, or so impossible to treat in the home environment that residential placement offered the only hope of correction.

It is cases such as these, children with a high nuisance value, vicious, delinquent and aggressively antisocial, that emphasise the need for a more vigorous policy of prevention. In this regard the Underwood Report stressed the value of a School Psychological Service, where the educational psychologist could advise on children with educational disabilities, on children with behaviour problems, and the many other apparently trivial abnormalities that may herald the approach of a frank maladjustment.

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## CHILD GUIDANCE CENTRE

Referrals have kept at a very high rate throughout the year, and have reached a total of 200, which is the highest number in one year since the Clinic was opened. The total number of children seen was 484, which is an increase of 66 on last year.

The development of the Clinic is more clearly seen by mentioning that this total number of children seen shows an increase of 116 compared with two years ago. Thus it will be clear that this growing and expanding service is difficult to keep going with the same efficiency when only the same staff are available. We have to see, therefore, that we close every case we possibly can, and only continue with those with whom we can work constructively and who we feel can benefit.

Of all new cases 20 per cent. were closed as in need of diagnosis and advice only—this is the same as in previous years. 28 per cent. it was felt did not need, or could not benefit from, intensive treatment but periodic review or superficial treatment of a supportive kind was thought necessary. 31 per cent. were considered to need more intensive treatment by the Psychiatrist or Psychologist. For this type of treatment the child and the parent need to be seen weekly. The child is seen by the therapist and the parent by the Psychiatric Social Worker. As the Consultant Psychiatrist's four

sessions only give space for a maximum of 18 weekly treatment sessions, it will be appreciated how difficult it is to provide the treatment required. At the end of the year the treatment waiting-list was 20, which is 6 more than at the end of last year.

Of the new children seen this year, only 3 were thought to need residential placement as maladjusted children. 4 other children from previous years were also recommended for residential placement. This is only 1.4 per cent. of all the children seen during the year, which is a very small proportion. This is because we have always maintained the policy, which was supported by the Underwood Committee's report, that residential treatment should only be used if it is clear there is no hope of treating the child successfully while he remains at home. At the end of the year 18 children were in residential schools or hostels as maladjusted pupils, and 3 of these are children who were in any case in the care of the Children's Department. This is only 0.1 per cent. of the child population in the Local Authority's maintained schools.

Throughout the year the Consultant Psychiatrist has continued to meet monthly all the School Medical Officers, discussing the relationship of their general work with that of the Child Guidance Centre, and endeavouring to build up a prophylactic approach to mental health problems. There has also been a very close contact maintained with the Probation and Children's Departments, with periodic discussions on cases of mutual concern. We have once again been encouraged by the close co-operation we have received from Doctors, Health Visitors, Children's Officer, and Probation Officers.

W. H. WHILES,
*Consultant Children's Psychiatrist*

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**ANNUAL RETURNS FOR YEAR ENDING 31st DECEMBER, 1956**

| | |
|---|---|
| Carried over from 1955—Awaiting investigation ... ... | 15 |
| Total Open Cases ... ... ... | 308 |
| Total new cases referred during 1956 ... ... ... ... | 200 |
| Total new cases seen during 1956 ... ... ... ... ... | 170 |
| Total cases uneventuated ... ... ... ... ... ... | 14 |
| Cases closed during 1956 ... ... ... ... ... ... | 137 |
| Cases re opened during 1956 ... ... ... ... ... | 6 |
| Total open cases on 31st December, 1956 ... ... ... | 347 |
| Awaiting investigation 31st December, 1956 ... ... .. | 26 |
| Awaiting psychiatric investigation ... ... ... .. | 38 |
| Total number of children seen during 1956 ... ... .. | 484 |

*Source of Referral of Children Investigated*

| | |
|---|---|
| School Medical Officer | 53 |
| General Practitioners | 49 |
| Children's Officer | 7 |
| Head Teachers | 19 |
| Probation Officers | 7 |
| Parents | 26 |
| Victoria Home for Crippled Children | 1 |
| Other Social Agencies | 8 |
| | 170 |

*Age Groups of referrals*

| | |
|---|---|
| Pre-school age | 14 |
| Infants School age | 28 |
| Junior School age | 66 |
| Secondary Modern | 41 |
| Grammar { G.C.E. Stream | 3 |
| Grammar { Grammar School | 13 |
| Left School | 5 |
| | 170 |

*Reasons for Referral.*

| | |
|---|---|
| Behaviour difficulties | 70 |
| Educational advice | 32 |
| Nervous Symptoms | 32 |
| Psychosomatic Symptoms | 25 |
| Speech problems | 11 |
| | 170 |

*Summary of Recommendations.*

| | |
|---|---|
| Diagnostic and Advice only | 47 |
| Periodic survey and superficial treatment | 49 |
| Treatment by Psychiatrist or Educational Psychologist | 53 |
| Still under investigation | 13 |
| Residential treatment advised—as maladjusted 3 / Open-air School 5 | 8 |
| | 170 |

*Children under Treatment on 31st December,* 1956.

| | |
|---|---|
| Regular treatment by Psychiatrist | 18 |
| Regular treatment by Psychologist | 30 |
| Treatment waiting list for Psychiatrist and Psychologist | 20 |
| Periodic survey by Psychiatrist and Psychologist | 198 |
| Open but no active treatment at present | 72 |
| Still under investigation | 7 |
| Awaiting residential placement | 2 |
| | 347 |

*Closures.*

| | |
|---|---|
| Diagnostic and Advice only | 69 |
| Satisfactory adjustment after treatment | 24 |
| Improved | 19 |
| Transferred to other agencies | 8 |
| Removed from area | 6 |
| Left school | 1 |
| Unco-operative or failed to respond | 10 |
| | 137 |

*Total Interviews.*

*Psychiatrist.*

| | |
|---|---|
| Diagnostic with children | 115 |
| Parents and others | 172 |
| Psychotherapy | 498 |
| Survey | 135 |
| | 920 |

*Psychologist.*

| | |
|---|---|
| Diagnostic with children | 337 |
| Parents and others | 232 |
| Treatment | 614 |
| Survey | 337 |
| School Visits | 81 |
| Home Visits | 25 |
| | 1632 |

*Psychiatric Social Worker with Parents.*

| | |
|---|---|
| Diagnostic | 170 |
| Parents and others | 1205 |
| Home Visits | 22 |
| | 1397 |

## IMMUNISATION AGAINST INFECTIOUS DISEASES

A wide variety of immunising procedures are available today, some of them (as for example smallpox vaccination or immunisation against diphtheria) giving virtually complete protection, others (e.g. poliomyelitis vaccination) giving a very fair measure of security while not necessarily guaranteeing complete immunity.

All immunisation has been completely voluntary since 1948, and it is interesting to compare the enthusiasm with which parents now seek protection for their children against poliomyelitis, and the complacency that so often encompasses them in their dealings with the far more lethal smallpox and diphtheria.

Times change, and poliomyelitis is now the disease of the moment, while the rarity of smallpox and diphtheria is a memorial to the success of vaccination and immunisation schemes of yesterday. These diseases can return, however, and the unprotected child is not only a danger to himself but to others, and parents are urged to seek every opportunity of protecting their children by the simple and painless methods now at our disposal.

The diphtheria immunisation index for school children for 1956 was 48.45 per cent., still far too low a figure for complacency.

1,748 scholars who received initial injections in infancy received a re-inforcing dose during the year.

20 others not previously treated received their first course of two injections.

B.C.G. Vaccination (Contact Scheme) — Number vaccinated against tuberculosis, 311.

Poliomyelitis—Number vaccinated, 377.

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## NOTIFICATIONS OF INFECTIOUS DISEASES

The following relate to school children :—

| | |
|---|---|
| Scarlet Fever ... ... ... | 91 |
| Measles ... ... ... ... | 220 |
| Whooping Cough ... ... ... | 34 |
| Pneumonia ... ... ... ... | 6 |
| Scabies ... ... ... ... | 1 |
| Erysipelas ... ... ... ... | 1 |
| Food Poisoning ... ... ... | 1 |
| Encephalitis ... ... ... ... | 1 |
| Poliomyelitis—paralytic ... ... | 1 |
| non-paralytic ... | 1 |
| Dysentry ... ... ... ... | 30 |
| | 387 |

There were also 2 notifications of respiratory tuberculosis and 5 other forms of this disease.

## FOLLOWING UP

Most valuable work is done by the school nurses in the general follow-up of children found to have defects or who have recently been ill. By home visits the nurse is able to give helpful advice to the parent and can satisfy herself that treatment has been sought from the general practitioner and his advice carried out. In this connection I often feel it is a great pity the general practitioner does not make fuller use of the services of the school nurse who could assuredly by home visits and parental advice relieve him of considerable anxiety as to the care of the sick child and no doubt thereby save his valuable time for other pressing duties. This form of assistance of the Health Visitor/School Nurse is undoubtedly envisaged in the wording of Section 24 of the National Health Service Act.

Under the above heading, mention must be made of the valuable assistance given to the School Health Service by the N.S.P.C.C. Ready and willing help is always forthcoming from the local inspector, in those cases which it is considered require his attention.

The School Nurses recorded the following reasons for home visits :—

| | *No.* |
|---|---|
| Eye Defects ... ... ... ... | 212 |
| Ear, Nose and Throat conditions ... | 114 |
| Skin complaints ... ... ... | 17 |
| Uncleanliness ... ... ... ... | 69 |
| Tuberculin Testing ... ... ... | 42 |
| Miscellaneous ... ... ... ... | 425 |
| | 879 |

### Exclusion from School

Scholars were excluded from school during 1956 for the following reasons :—

| | |
|---|---|
| Impetigo ... ... ... ... | 6 |
| Ear, Nose and Throat conditions ... | 2 |
| Uncleanliness ... ... ... ... | 5 |
| Eye conditions ... ... ... | 2 |
| Miscellaneous ... ... ... ... | 4 |
| Total ... ... ... ... ... | 19 |

### Open-Air Education

During the year 13 boys and 7 girls have been sent to residential open-air schools. The benefit derived by a debilitated child after a period at such a school is often most striking and the value of open-air education with good and regular meals is beyond doubt.

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## STAFF EXAMINATIONS

74 school teachers were examined by the medical staff, as a condition of appointment, also 62 applicants for entry to Training Colleges.

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## EMPLOYMENT OF SCHOOL CHILDREN

A total of 633 children aged 13 or more who wished to be employed outside school hours were medically examined by the School Medical Officers. All except six were found fit for the purpose. The occupations proposed were :—

| | |
|---|---|
| Errand boys ... ... ... ... | 48 |
| News boys ... ... ... ... | 408 |
| News girls ... ... ... ... | 122 |
| Shop assistants ... ... ... | 41 |
| Other ... ... ... ... ... | 8 |

7 other children were granted medical certificates as being fit to take part in public entertainment.

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## HANDICAPPED CHILDREN

The experience of many years has shown that unless specially favourable conditions are provided for handicapped children, many of them fail to develop their full potential, with a consequent loss both to the child and the community.

The selection of children needing special educational treatment is therefore a matter of great concern, not only to medical officers of the local education authority, but to teachers, parents, and others such as educational psychologists who are fitted by training and experience to give expert advice on a child's educational needs. It is essential that, as far as possible, these experts should agree with the parents on the course to be adopted in the child's best interest, for lack of unity is bound to have an unsettling effect on the child, particularly if the decision is in favour of residential schooling.

It is the Ministry's view that wherever possible, a handicapped child should be retained in an ordinary school and the reasons for this view are not financial or anything to do with administrative convenience, but solely in the interests of the child. Although certain types of handicapped children, with very severe disabilities, must almost invariably be sent to a special school if they are to make progress, there is a great danger in surrounding a child by an atmosphere of disability, a danger of frustration and deprivation which can often be minimised by keeping them within the normal school environment, providing they are given the fullest opportunities and both teachers and parents have an understanding of the problem.

It is unfortunate that many special schools are so far away from the child's home, so that parents can only visit infrequently during term-time. Children become homesick, the feeling of deprivation becomes greater, and educational progress suffers, and many requests by parents for the premature withdrawal of children from residential schools are occasioned solely by inability to visit often enough. Residential schools are therefore a last resort, when simpler remedies, such as ordinary schools or special day schools have been found unsuitable, and every case must be considered as an individual problem in which the medical, educational and emotional needs of the child must be kept in mind.

The general distribution of handicap appears to vary quite considerably, and Bournemouth is fortunate in having a comparatively low level of disability among its schoolchildren, lower than in many other parts of the country.

During the year 103 children were newly ascertained to be in need of special educational treatment, making a total of 403 children on the Handicapped Pupils' Register, or 2.4 per cent. of the total school population. The precise incidence of disability in schoolchildren throughout the country is not known, but the Report of the Chief Medical Officer of the Ministry of Education showed that in 1955 about 1.2 per cent. of the school population either attended or awaited placement in special schools, and it may be assumed that a considerably greater percentage of handicapped children attended ordinary schools.

Many of the handicapped children on the Bournemouth Register had comparatively slight defects, so that they were able

to continue at ordinary schools, often with a modified curriculum and receiving medical treatment where appropriate. In others, the handicap was greater, and it was necessary to arrange for admission to a day or residential special school or for education to be provided in hospital or in the child's home.

The largest single group was the educationally subnormal, which formed approximately 1 per cent. of the school population in 1956. Of the 160 children on the register, 54 attended special schools at the end of the year, 95 attended ordinary schools (usually in special classes) and 6 received home tuition. Pupils at special schools included 29 children born between 1945-48 attending Alma Road School, and of these some were "educable" feebleminded children with intelligence quotients not much more than 60, others were "dull", and some were children of quite normal intelligence but whose educational progress had been retarded in some way. The results obtained in many of these cases were exceptionally good.

The 95 ESN children attending Special Classes in ordinary schools came from similar levels of intelligence, but the majority were older than those attending Alma Road School.

During the year 8 children were excluded from school as "ineducable", 3 boys and 5 girls, one of them having previously attended an ordinary school, one a special school, one a small private school and one a hospital school. The remaining four children, aged between 4-8 years, had never attended school.

Twenty-one educationally subnormal children left school during the year, and two of them were reported informally to the local health authority as in need of supervision.

Speech defects were discovered in 46 children, making a total of 75 on the register. Arrangements for speech therapy have been largely unchanged, children receiving as near individual tuition as possible and their parents being encouraged to attend and learn how to continue therapy at home. Most of the cases showed very considerable improvement after about 12 months.

Three children were found to be physically handicapped during the year, and the total in this group was 43. Twenty-six of them attended ordinary schools, the remainder being at special schools or receiving home tuition. The commonest disabilities were

cerebral palsy and the after-effects of poliomyelitis, while there were three cases of tuberculous bone disease and two cases of heart disease.

"Delicate" children numbered 37 and were chiefly those suffering from chest conditions (usually asthma), general debility or poor nutrition. Many of them showed considerable improvement following a period at an open air school.

All the children classified as "deaf", seven in number, had suffered from this disability since birth, and in consequence of their lack of speech, needed residential placement. The less severely handicapped "partially deaf" children were frequently able to attend ordinary schools, sitting at the front of the class or using hearing aids, and in many cases continuing to attend the hospital ear clinics. Middle ear infection was the cause of much of this minor deafness.

All the 5 children classified as "blind" had been blind since birth or shortly afterwards. Four of them attended Special Schools for the Blind, and the fifth, a child aged 2 years, awaited placement at the end of the year. There were also two "partially sighted" children attending special schools and three others awaited placement.

Four children were added to the register of Maladjusted children, making a total of 33, or approximately 1 per 500 registered pupils. This compares with the figure of one maladjusted per 100 registered pupils estimated by the Ministry as a normal expectation in any area, and there is probably no other form of handicap requiring such a variety of modifications to the ordinary educational system.

In 18 cases residential placement has become necessary, and these children have usually been seen by the Child Guidance team during their school holidays.

Epileptic children were mainly educated in ordinary schools if fits were infrequent or under adequate control, and only 2 out of the 14 cases were in residential schools.

## HANDICAPPED PUPILS

| Category | Ascertainment | | Special Schools* | | | |
|---|---|---|---|---|---|---|
| | New Cases Ascertained During 1956 | Number on Register, 31.12.56 | Number Recommended During the Year for Admission | Number Admitted During the Year | Number Attending on 31.1.57 | Number Awaiting Placement on 31.1.57 |
| Blind | 2 | 5 | 2 | 1 | 4 | 1 |
| Partially Sighted | 1 | 5 | 1 | — | 2 | 3 |
| Deaf | 3 | 7 | 2 | 1 | 7 | — |
| Partially Deaf | — | 24 | 1 | — | 8 | 2 |
| Delicate | 17 | 37 | 17 | 11 | 11 | 4 |
| Physically Handicapped | 3 | 43 | 1 | 1 | 10 | 1 |
| Educationally Sub-normal | 27 | 160 | 20 | 18 | 54 | 16 |
| Maladjusted | 4 | 33 | 5 | 7 | 18 | 4 |
| Epileptic | — | 14 | — | — | 2 | — |
| Speech Defective | 46 | 75 | — | — | — | — |
| Total | 103 | 403 | 49 | 39 | 116 | 31 |

* Includes boarding houses or hostels : excludes Hospital Schools.

Number of Handicapped pupils being educated under arrangements made under Section 56 of the Education Act, 1944 18

Number of children reported during the year under Section 57 (3) of the Education Act, 1944 ... ... ... 8

" " " " " " " " " " (5) " " " " " ... ... ... 2

## SCHOOL MEALS SERVICE

There is no doubt of the great value to the nutritional state and the general health of the scholars of the School Meals Service.

The standard of meals supplied and the care and proficiency with which they are prepared reflect great credit on the school meals organisers and staff under their direction.

The standard of hygiene maintained in school canteens and canteen workers continues to be high and the meals organisers are obviously ever conscious of the dangers inherent in mass produced meals.

27 Centres are utilised for the provision of meals and the number of pupils partaking of meals is illustrated by a sample day on which statistics were collected.

| *Day in :* | *Attendance* | *Meals provided* |
|---|---|---|
| October | 15,519 | 7,361 (of which 350 were free) |

On the same day 11,989 pupils were provided with milk at school (⅓ pint each).

# Annual Report on the School Dental Service—1956.

## General Observations

There were four dental surgeons employed by the Bournemouth Local Authority throughout the year, and each of the dental surgeons devoted some of their time to the dental care of Mothers and young children. We were fortunate in having a full establishment of dental officers, each of whom had the valuable help of a dental surgery assistant.

The progress which had been made in recent years was maintained, and I am pleased to record that all the schools were visited by the dentists during the year for routine dental inspections.

Twenty per cent. of the children inspected were taken by their parents to receive treatment by private dentists, usually under the General Dental Service.

## Importance of Early Treatment

All dentists consider it very important that dental defects should be treated as soon as possible after detection, in order that small cavities do not become large ones and lead to the loss of the teeth.

During the year the parents of children who failed to keep two appointments for treatment were visited by the School Nurse of the area in order to ascertain why the appointments were not kept. Whenever the parents wished, further appointments were given and this reduced the ultimate number of failures by about one half. In selected cases, I think this procedure well worth while especially as the school nurses did not need to make special journeys to these homes, but visited the parents while they were in the neighbourhood in the course of their other duties.

As I mentioned in my report for last year the majority of parents who stated that they would obtain treatment for their children privately did so but again there were some who made this

an excuse for delaying the acceptance of treatment and later they helped to increase the number of dental extractions which were necessary at the clinics.

Nevertheless, as the years pass an increasing number of parents obtain regular dental supervision and treatment for their children either through the School Dental Service or the General Dental Service, and this has to a considerable extent mitigated the ill-effects which would have resulted from the increasing caries incidence which is now thought to be common in children throughout this country.

## Orthodontic Treatment

Orthodontic cases vary considerably in their complexity, the more straightforward ones were treated by the school dental officers and the complicated cases were diagnosed and treated by Mr. J. D. Hooper, the Orthodontic Consultant at the Royal Victoria Hospital, Boscombe.

Twenty-four children were referred to Mr. Hooper for an opinion and sixty children were referred for diagnosis and treatment. Details of the treatment provided by the school dental officers at the clinics are given in the statistical part of this report.

## Post Graduate Study

Mrs. H. S. Hooper attended a post graduate course at the Children's Department of the Eastman Dental Hospital in London from March 19th to 24th. This proved to be of great value, much useful knowledge being gained and we are grateful to the Bournemouth Local Authority for the help and encouragement given.

## Annual Meeting of British Dental Association

I attended the Annual Meeting of the British Dental Association at Brighton in June and I very much appreciated the privilege of being present at many interesting lectures, discussions and practical demonstrations.

A "Gateway to Health" dental exhibition, to which the public were invited, was held and an important feature was the great

interest shewn in dental health education by many dentists in private practice as well as those in the service of local authorities.

### Radiology

The X-ray unit at the Central Clinic proved to be a great asset and was most useful, four hundred and sixty children had X-rays during the year.

### Co-operation of Boscombe Hospital Staff

I should like to thank all those members of the staff of the Royal Victoria Hospital, Boscombe, who kindly gave their valuable help during the year.

### Co-operation of Teachers

As in past years the co-operation of Headmasters, Headmistresses and Teachers was of a very high standard and I am very grateful for their helpfulness which contributed so largely to the smooth running of the dental scheme.

### Staff Changes

There was only one change in the dental staff during the year when Miss F. M. Wilding, the dental surgery assistant at the East Howe Clinic, left on 13th August. Fortunately the vacancy was filled by Miss H. Allen, a very willing and competent worker, who had previously assisted a private dentist for eight years.

A. A. WOOD.

# Medical Inspection Returns

Year Ended 31st December, 1956

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## TABLE I.

## MEDICAL INSPECTION OF PUPILS ATTENDING MAINTAINED PRIMARY AND SECONDARY SCHOOLS (INCLUDING SPECIAL SCHOOLS)

### A—PERIODIC MEDICAL INSPECTIONS.

| | |
|---|---|
| Number of Inspections in the prescribed Groups :— | |
| New entrants ... ... ... ... | 1097 |
| Aged 10 years ... ... ... ... | 1608 |
| Aged 14 years ... ... ... ... | 1129 |
| Total ... | 3834 |
| Additional Periodic Inspections† ... ... ... | 1517 |
| Grand Total ... | 5351 |

### B.—OTHER INSPECTIONS.

| | |
|---|---|
| Number of Special Inspections ... .. ... | 1819 |
| Number of Re-Inspections ... ... ... | 248 |
| Total ... | 2067 |

### C—PUPILS FOUND TO REQUIRE TREATMENT.

**Number of Individual Pupils found at Periodic Medical Inspection to Require Treatment (excluding Dental Diseases and Infestation with vermin).**

| Group | For defective vision (excluding squint) | For any of the other conditions recorded in Table III | Total individual pupils |
|---|---|---|---|
| (1) | (2) | (3) | (4) |
| Entrants ... ... ... ... | 6 | 119 | 122 |
| Aged 10 years ... ... ... | 200 | 218 | 388 |
| Aged 14 years ... ... ... | 188 | 141 | 301 |
| Total ... ... ... ... | 394 | 478 | 811 |
| Additional Periodic Inspections† ... | 335 | 200 | 492 |
| Grand Total ... ... ... | 729 | 678 | 1303 |

†Pupils at special schools or who missed the usual periodic examination

## D.—CLASSIFICATION OF THE PHYSICAL CONDITION OF PUPILS INSPECTED IN THE AGE GROUPS RECORDED IN TABLE I.A.

| Age Groups Inspected | Number of Pupils Inspected | Satisfactory | | Unsatisfactory | |
|---|---|---|---|---|---|
| | | No. | % of Col. (2) | No. | % of Col. (2) |
| (1) | (2) | (3) | (4) | (5) | (6) |
| Entrants ... ... | 1097 | 1087 | 99.09 | 10 | 0.91 |
| Age 10 years ... ... | 1608 | 1594 | 99.13 | 14 | 0.87 |
| Age 14 years ... ... | 1129 | 1121 | 99.29 | 8 | 0.71 |
| Additional Periodic Inspections ... | 1517 | 1505 | 99.21 | 12 | 0.79 |
| Total ... ... ... | 5351 | 5307 | 99.18 | 44 | 0.82 |

## TABLE II.

## INFESTATION WITH VERMIN

| | |
|---|---|
| (i) Total number of examinations in the schools by the school nurses or other authorised persons ... ... ... | 38,712 |
| (ii) Total number of individual pupils found to be infested ... | 79 |
| (iii) Number of individual pupils in respect of whom cleansing notices were issued (Section 54 (2), Education Act, 1944) ... | NIL |
| (iv) Number of individual pupils in respect of whom cleansing orders were issued (Section 54 (3), Education Act, 1944) ... | NIL |

# TABLE III.

## A.—RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION.

| Defect Code No. | Defect or Disease | Periodic Inspections — Number of defects: Requiring treatment | Periodic Inspections — Number of defects: Requiring to be kept under observation, but not requiring treatment | Special Inspections — Number of defects: Requiring treatment | Special Inspections — Number of defects: Requiring to be kept under observation, but not requiring treatment |
|---|---|---|---|---|---|
| | (1) | (2) | (3) | (4) | (5) |
| 4 | Skin ... ... ... | 40 | 100 | 1 | — |
| 5 | Eyes— (a) Vision ... | 729 | 104 | 2 | 1 |
| | (b) Squint ... | 82 | 5 | — | — |
| | (c) Other ... | 11 | 57 | — | — |
| 6 | Ears—(a) Hearing ... | 30 | 12 | — | 3 |
| | (b) Otitis Media | 8 | 3 | — | — |
| | (c) Other ... | 25 | 33 | — | — |
| 7 | Nose or Throat ... | 48 | 277 | 1 | 2 |
| 8 | Speech ... ... ... | 28 | 8 | 1 | — |
| 9 | Lymphatic Glands ... | — | 41 | — | — |
| 10 | Heart ... ... ... | 10 | 22 | 2 | — |
| 11 | Lungs ... ... ... | 14 | 14 | — | — |
| 12 | Developmental :— | | | | |
| | (a) Hernia ... | 6 | — | — | — |
| | (b) Other... ... | 23 | 64 | 1 | 1 |
| 13 | Orthopaedic :— | | | | |
| | (a) Posture ... | 166 | 36 | 1 | — |
| | (b) Feet ... ... | 48 | 13 | 1 | — |
| | (c) Other... ... | 100 | 45 | 2 | 1 |
| 14 | Nervous System :— | | | | |
| | (a) Epilepsy ... | 5 | 2 | 1 | — |
| | (b) Other... ... | 2 | 2 | — | — |
| 15 | Psychological :— | | | | |
| | (a) Development | 19 | 5 | 18 | 11 |
| | (b) Stability ... | 12 | 7 | 1 | — |
| 16 | Other ... ... ... | 1 | 1 | — | — |

# TABLE IV.

## TREATMENT OF PUPILS ATTENDING MAINTAINED PRIMARY AND SECONDARY SCHOOLS (INCLUDING SPECIAL SCHOOLS)

### Group .—EYE DISEASES, DEFECTIVE VISION AND SQUINT

| | Number of cases dealt with by the Authority | otherwise |
|---|---|---|
| External and other, excluding errors of refraction and squint ... ... | 126 | 5 |
| Errors of Refraction (including squint) | — | 1524 |
| Total ... ... ... ... ... | 126 | 1529 |
| Number of pupils for whom spectacles prescribed ... ... ... ... | — | 681 |

### Group 2.—DISEASES AND DEFECTS OF EAR, NOSE AND THROAT

| | Number of cases treated by the Authority | otherwise |
|---|---|---|
| Received operative treatment— | | |
| (a) for diseases of the ear ... ... | — | 6 |
| (b) for adenoids and chronic tonsillitis... ... ... ... | — | 512 |
| (c) for other nose and throat conditions ... ... .. | — | — |
| Received other forms of treatment . . | 45 | 9 |
| Total ... ... ... ... ... | 45 | 527 |
| Total number of pupils in schools who are known to have been provided with hearing aids. | | |
| (a) in 1956 ... ... ... ... | 1 | — |
| (b) in previous years ... ... | — | 2 |

### Group 3.—ORTHOPAEDIC AND POSTURAL DEFECTS

| | By the Authority | Otherwise |
|---|---|---|
| Number of pupils known to have been treated at clinics or out-patient departments ... ... ... ... ... | — | 552 |

### Group 4.—DISEASES OF THE SKIN (excluding uncleanliness for which see Table II)

| | Number of cases treated or under treatment during the year by the Authority |
|---|---|
| Ringworm—(i) Scalp ... ... ... | — |
| (ii) Body ... ... ... ... | 1 |
| Scabies ... ... ... ... ... | 1 |
| Impetigo ... ... ... ... ... | 25 |
| Other skin diseases ... ... ... ... | 302 |
| Total ... ... ... ... ... | 329 |

## Group 5.—CHILD GUIDANCE TREATMENT

| | Number of cases treated or under treatment during the year by the Authority |
|---|---|
| Number of pupils treated at Child Guidance Clinics under arrangements made by the Authority ... ... ... ... ... | 453 |

## Group 6.—SPEECH THERAPY

| | |
|---|---|
| Number of pupils treated by Speech Therapists under arrangements made by the Authority ... ... ... ... ... | 124 |

## Group 7.—OTHER TREATMENT GIVEN

| | |
|---|---|
| (a) Number of cases of miscellaneous minor ailments treated by the Authority ... | 606 |
| (b) Pupils who received convalescent treatment under School Health Service arrangements ... ... ... ... | NIL |
| (c) Pupils who received B.C.G. vaccination | NIL |
| (d) Other than (a), (b) and (c) above ... | NIL |

# TABLE V.

## DENTAL INSPECTION AND TREATMENT

| | | | | |
|---|---|---|---|---|
| (1) | Number of pupils inspected by the Authority's Dental Officers. | | | |
| | (a) At Periodic Inspections ... ... ... ... ... | | | 14850 |
| | (b) As Specials ... ... ... ... ... ... ... | | | 605 |
| | | Total (1) ... ... | | 15455 |
| (2) | Number found to require treatment ... ... ... ... | | | 8374 |
| (3) | Number offered treatment ... ... ... ... ... | | | 7288 |
| (4) | Number actually treated ... ... ... ... ... | | | 4605 |
| (5) | Attendances made by pupils for treatment, including those recorded at heading 11 (h) ... ... ... | | | 13565 |
| (6) | Half-days devoted to : Periodic (School) Inspection ... ... | | | 117 |
| | Treatment ... ... ... ... | | | 1607 |
| | | Total (6) ... ... | | 1724 |
| (7) | Fillings : Permanent Teeth ... ... ... ... ... | | | 7490 |
| | Temporary Teeth ... ... ... ... ... | | | 1825 |
| | | Total (7) ... ... | | 9315 |
| (8) | No. of teeth filled : Permanent Teeth ... ... ... ... | | | 7094 |
| | Temporary Teeth ... ... ... ... | | | 1766 |
| | | Total (8) ... ... | | 8860 |
| (9) | Extractions : Permanent Teeth (a) Caries ... ... | 644 | | |
| | (b) To relieve over-crowding | 351 | | 995 |
| | Temporary Teeth ... ... ... ... ... | | | 2950 |
| | | Total (9) ... ... | | 3945 |
| (10) | Administration of general anaesthetics for extraction ... ... | | | 1719 |
| (11) | Orthodontics : | | | |
| | (a) Cases commenced during the year ... ... ... | | | 118 |
| | (b) Cases carried forward from previous year ... ... | | | 87 |
| | (c) Cases completed during the year ... ... ... | | | 52 |
| | (d) Cases discontinued during the year ... ... ... | | | 10 |
| | (e) Pupils treated with appliances ... ... ... | | | 205 |
| | (f) Removable appliances fitted ... ... ... ... | | | 137 |
| | (g) Fixed appliances fitted ... ... ... ... ... | | | NIL |
| | (h) Total attendances ... ... ... ... ... | | | 1154 |
| (12) | Number of pupils supplied with artificial dentures ... ... | | | 28 |
| (13) | Other operations : | | | |
| | Permanent teeth ... ... ... ... ... ... | | | 2422 |
| | Temporary teeth ... ... ... ... ... ... | | | 1028 |
| | | Total (13) | | 3450 |

# Contents of
# Medical Officer of Health's Report

# Contents of
# Principal School Medical Officer's Report